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Caernarvonshire County Council

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER
OF HEALTH

FOR THE YEAR

1962



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*With the Compliments
of the Chairman*

WELSH BOARD OF HEALTH
CATHAYS PARK
CARDIFF

Caernarvonshire County Council

*With the
County Medical Officer's
Compliments*

*County Offices
Caernarvon, North Wales*

Caernarvonshire County Council

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CAERNARVONSHIRE COUNTY COUNCIL

To the Chairman and Members of the Health Committee.

LADIES AND GENTLEMEN,

In this introduction to the Annual Report I invite attention to some aspects of the Health Services which are treated in more detail in the body of the Report. During the year the general health of the community has been well maintained and no unusual incidence of disease was discovered.

Tuberculosis

Surveying the statistics of tuberculosis allows us to derive a sober measure of satisfaction. The death rate for this year—9 per 100,000—is the lowest ever recorded in this county. A decrease in the number of new cases (77) notified is also recorded. In the table below I give figures collated into 5-yearly periods; they indicate the steady progress made.

Tuberculosis Mortality Rates
(Five-yearly periods)

5-Year Period	Rate per 100,000 Population			Denmark
	Caernarvon-shire	Wales	England and Wales	
1926-1930	138	104	92	76
1931-1935	124	97	79	61
1936-1940	118	82	66	40
1941-1945	85	75	66	34
1946-1950	74	62	49	24
1951-1955	43	30	21	9
1956-1960	27	14	10	4
Rate for 1961	18	11	7	4
Rate for 1962	9	9	7	4

Although progress is being made, we must always guard against becoming complacent. It is absolutely essential to give protection with B.C.G. to more children and young adults, and to increase our efforts in general health education, and especially to tuberculous families. We must persist in our efforts to trace the source of the disease—the infector—of every new case.

Other Infectious Diseases

Diphtheria has been controlled at present. It is again a pleasure to report that for the seventeenth year in succession not one child who has been completely immunised has been found to suffer from diphtheria. But it is imperative to protect more children against this disease. Parents show an increasing apathy towards this simple measure because they

have no experience of this disease, which killed and maimed so many children and adults in past years.

A new oral vaccine for immunisation against Poliomyelitis was introduced in March 1962. Nearly 9,000 doses had been given by the end of the year and no abnormal reactions were reported. I am glad to record that not one case of poliomyelitis was discovered in the county during the year. It is worth recording that not one Caernarvonshire resident, completely immunised, has been notified since 1957.

Infant Welfare

Attendances at Infant Welfare Clinics remain high. Although some of the clinics are a few miles away from homes in the rural areas, it is gratifying to find that more than 90 per cent of all children under 1 year of age do attend the clinics. Forty clinics are established in the county.

I am glad to record my appreciation of the continuous help voluntarily given at the clinic sessions by local ladies. Most of them have devoted several years to the service, and their assistance contributes in no small measure to the success of the service.

The continual fall in the peri-natal mortality rate is very encouraging. It is a reflection of the increasing care given to mothers before their baby is born, and at the birth of the child and during the first week of the child's life. In this table are given the rates for the five-yearly periods from 1938. It will be observed that the Caernarvonshire rate is regularly approximating the average rate for England and Wales. We cannot be satisfied until the rate is well below the average. That challenge will be a spur to greater efforts in future.

Peri-Natal Mortality Rates (Five-yearly periods)

Period	No. of Live Births	No. of Still Births	No. of Infants died under one week of age	Total Still Births and Deaths of Infants under one week of age	Peri-Natal Mortality Rate per 1,000 Total Live and Still Births	Average Rate England and Wales
1938-1942	8,571	413	226	639	71.13	56.3
1943-1947	9,797	278	211	489	48.54	44.4
1948-1952	9,056	225	154	379	40.81	37.9
1953-1957	8,024	194	122	316	38.45	37.1
1958-1962	8,360	181	125	306	35.83	32.9

Chiropody

This service, introduced in September 1961, is now available for (a) Old Age Pensioners, (b) Expectant Mothers, and (c) Physically Handicapped Persons of all ages.

Its application to old people is particularly effective in helping to maintain their mobility. Among other measures, maintenance of mobility does prevent old people becoming despondent and does assist them to remain healthy.

Mental Health

This service is developing slowly because of difficulty in recruiting suitable and trained staff, but it is progressing on sound broad, modern, concepts. Details will be found on pages 92-103.

Other Services

In the body of the report will be found details of the complex preventive health services maintained by the Department. They represent some of the efforts of the staff who are dedicated to improving the health and happiness of those whom they serve.

Attention is invited to details in the report concerning these services :

Care of Mothers and Young Children, Audiology, Midwifery, Health Visiting, Home Nursing, Ambulance, Welfare and Rehabilitation, Health Education, Milk Supplies, Food and Drugs.

The continuing interest and support of the Chairmen and members of the County Health Committee and its Sub-Committees is gratefully acknowledged. To all my staff I am grateful for their devotion to duty and for their desire to assist in the further development of the service.

D. E. PARRY-PRITCHARD.

COUNTY HEALTH COMMITTEE

December, 1962

Chairman : ALDERMAN OWEN ELLIS

Vice-Chairman : ALDERMAN THOMAS MORRIS

ALD. MRS. E. CHAMBERLAIN, M.B.E., J.P.	COUN. MRS. M. E. HUGHES
„ A. H. DAVIES	„ T. J. HUMPHREYS
„ MRS. A. FISHER, M.B.E., J.P.	„ D. T. JONES
„ R. J. GRESLEY JONES	„ W. L. JONES
„ CAPT. R. O. JONES	„ J. EVANS JONES
„ A. MACFARLANE	„ O. E. LLOYD JONES
„ J. HOWELL ROBERTS	„ J. D. JONES
„ E. D. ROWLANDS	„ ROBERT OWEN
„ JOHN THOMAS, J.P.	„ E. OWEN PARRY
	„ DR. T. G. PRITCHARD
	„ J. T. ROBERTS
COUN. MRS. M. CAMPBELL BAIRD	„ O. MEURIG ROBERTS
„ J. A. BAINES, J.P.	„ HUGH THOMAS
„ OSWALD T. DORKINS	„ D. EMRYS WILLIAMS
„ ALUN J. HUGHES	„ FFWC WILLIAMS
„ EMYR HUGHES	„ GWILYM H. WILLIAMS
„ J. O. HUGHES	„ R. GLYN WILLIAMS

Added Members

REPRESENTING

<i>Medical Profession</i>	DR. R. ARMSDEN
	DR. J. DOUGLAS JONES
	DR. I. MOSTYN WILLIAMS
<i>Chemists</i>	ARTHUR WILLIAMS, ESQ.
<i>Dental Surgeons</i>	J. F. HUMPHREYS JONES, ESQ.
<i>Executive Council</i>	J. M. WATKINS, ESQ.
<i>Hospital Management Committee</i> ...	MRS. E. DARBISHIRE, J.P.
<i>Others</i>	MRS. JOHN THOMAS, M.B.E.
	J. EVAN ROBERTS, ESQ., J.P.

Clerk to the County Council : J. E. OWEN-JONES, ESQ., M.A., LL.B.

County Treasurer : ELFYN E. WIGLEY, ESQ., B.A., F.S.A.A., F.I.M.T.A.

STAFF OF THE PUBLIC HEALTH SERVICE

<i>County Medical Officer of Health and Principal School Medical Officer</i>	D. E. PARRY-PRITCHARD O.B.E., M.D., D.P.H., M.B., Ch.B.
<i>Deputy County Medical Officer of Health and School Medical Officer</i>	C. T. BAYNES, M.D., D.P.H., M.B., Ch.B.
<i>Senior Assistant Medical Officer</i>	M. SLATER, M.B., Ch.B., C.P.H., D.C.H.
<i>Assistant Medical Officers</i> ...	J. R. P. MURLEY, M.R.C.S., L.R.C.P., D.P.H. J. DONNELLY, M.B., Ch.B., D.Obst. R.C.O.G.
<i>County Superintendent Nursing Officer</i>	MISS M. RICHARDS, S.R.N., S.C.M., H.V., M.T.D., Q.N.S.
<i>Senior Rehabilitation Officer</i> ...	MRS. E. J. MILLER, B.A.
<i>Chief Mental Health Officer</i> ...	G. H. EGERTON
Whole-time Health Visitors and School Nurses	... 26
Midwives employed directly by the Council :	
Full-time	... 3
Part-time	... 49
District Nurses employed directly by the Council :	
Full-time	... 7
Part-time	... 49
<i>County Health Officer</i> ...	ANEURIN JONES, <i>Public Health Inspector</i>
<i>Chief Clerk</i> ...	C. PARRY

Regional Hospital Board Staff

<i>Obstetrician and Gynaecologist</i> ...	O. VAUGHAN JONES, M.D., F.R.C.S., F.R.C.O.G. W. MACFARLANE, M.B., Ch.B., M.R.C.O.G.
<i>Paediatrician</i> ...	GWYN GRIFFITH, M.D., F.R.C.P., D.C.H., D.P.H.
<i>Chest Physician</i> ...	J. GLYN JONES, M.D., B.Chir.

Food and Drugs Act

<i>Public Analyst</i> ...	J. G. SHERRAT, B.Sc., F.R.I.C.
<i>Deputy Public Analyst</i>	R. SINAR, B.Sc., F.R.I.C.
<i>County Inspectors</i> ...	E. T. EDWARDS (<i>Chief</i>) ROBERT ROBERTS (<i>Deputy</i>) EVAN J. GRIFFITHS

CHAPTER I

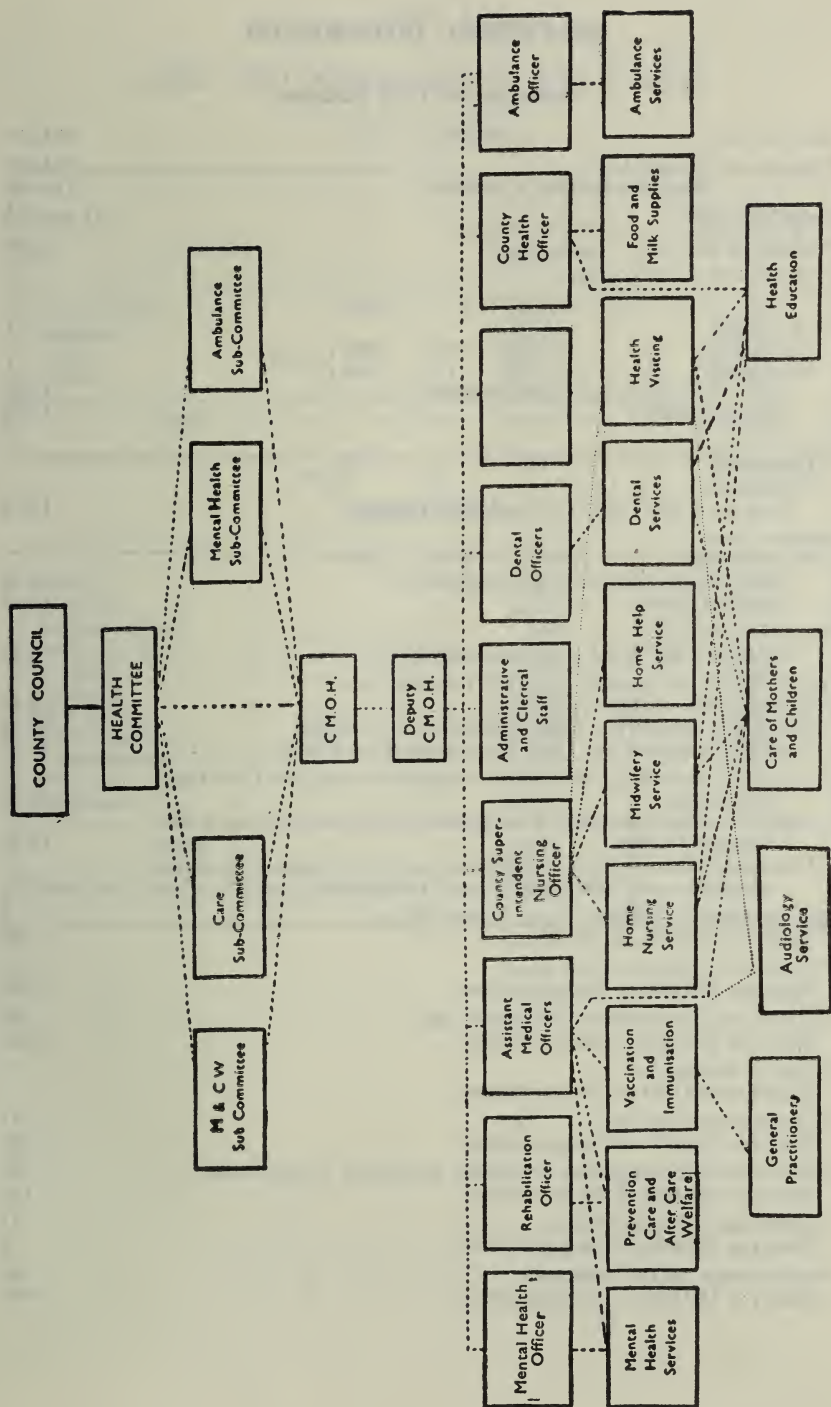
GENERAL NOTES ON THE LOCAL HEALTH SERVICES**Administration**

The Health Services provided by the County Council under the National Health Service Act 1946 are governed by the County Health Committee and four Sub-Committees, viz. Maternity and Child Welfare, Mental Health, Care, Ambulance.

The County Medical Officer of Health is responsible for the central control, co-ordination and supervision of the services. Periodical staff meetings are held to secure the efficient co-ordination and development of the services provided in the county. The diagram on page 9 displays the administrative pattern and inter-relation of the services.

Voluntary Organisations

Continued assistance has been received from the various Voluntary Organisations in the County, and I am glad to record my appreciation of the value of their services both to the Health Department and to members of the public who are assisted by the Department.



CHAPTER 2

STATISTICAL INFORMATION

Summary of Vital Statistics

Area in Acres	364,108
Population : Census 1951	124,074
Registrar-General's Estimate	120,460
Rateable Value	£1,540,678
Product of Id. rate	£5,956

Extracts from Vital Statistics

	M.	F.	Total	
LIVE BIRTHS				
Legitimate	872	809	1,681	} 1,786
Illegitimate	62	43	105	
Crude Birth Rate per 1,000 Population				14.83
Adjusted Rate				16.31
STILLBIRTHS				
Legitimate	13	9	22	} 24
Illegitimate	—	2	2	
Rate per 1,000 Total (Live and Still) Births				13.26
DEATHS FROM				
ALL CAUSES	978	914	1,892	
Crude Death Rate per 1,000 population				15.71
Adjusted Rate				13.51
MATERNAL DEATHS 1 1				
Rate per 1,000 Total (Live and Still) Births				0.55
DEATH RATES OF INFANTS UNDER 1 YEAR OF AGE				
All infants per 1,000 Live Births				24.64
Legitimate infants per 1,000 Legitimate Live Births				24.39
Illegitimate infants per 1,000 Illegitimate Live Births				28.57
Neo-natal Mortality Rate (deaths under four weeks per 1,000 total live births)				13.99
Early Neo-Natal Mortality Rate (deaths under one week per 1,000 total live births)				12.88
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and stillbirths)				25.97
DEATHS FROM ENTERITIS (under 2 years of age) 3				
Rate per 100,000 of Live Births				168
DEATHS FROM MEASLES (all ages) Nil				
Rate per 100,000 of the population				0.00
DEATHS FROM WHOOPING COUGH (all ages) Nil				
Rate per 100,000 of the population				0.00
ZYMOTIC MORTALITY 5				
Rate per 100,000 of the population				4
DEATHS FROM CANCER 314				
Rate per 100,000 of the population				261
DEATHS FROM RESPIRATORY DISEASES (excluding Tuberculosis) 179				
Rate per 100,000 of the population				149
DEATHS FROM TUBERCULOSIS 11				
Rate per 100,000 of the population				9
DEATHS FROM HEART DISEASES 736				
Rate per 100,000 of the population				611

TABLE 1

AREA AND POPULATION OF THE COUNTY

Rural Districts

District	Estimated Resident Population	Acreage as constituted at 30th June, 1935
Nant Conway	5,910	88,222
Gwyrfai	21,180	96,475
Lleyn	16,310	114,831
Ogwen	4,610	32,526
Totals	48,010	332,054

Urban Districts

Bangor	14,420	1,576
Bethesda	4,190	893
Bettws-y-Coed	770	4,472
Caernarvon	9,030	2,213
Conway	11,100	3,808
Criccieth	1,580	1,132
Llandudno	17,170	4,920
Llanfairfechan	2,930	4,472
Penmaenmawr	3,770	3,814
Pwllheli	3,610	1,211
Portmadoc	3,880	3,543
Totals	72,450	32,054
Total for Rural and Urban Districts	120,460	364,108

OTHER VITAL STATISTICS

TABLE 2

(Rates per 1,000 of the Population)

District	BIRTHS		† Still	DEATHS		* Infant Mortality	Cancer	Res- piratory Diseases	Tuber- culosis
	Live			All Causes					
	Crude	Adjusted		Crude	Adjusted				
RURAL DISTRICTS									
Nant Conway ...	14.89	16.97	0.00	10.99	10.33	11.36	2.71	1.69	0.00
Gwyrfai ...	14.21	16.77	16.34	17.09	14.87	39.87	2.59	1.94	0.14
Lleyn ...	14.53	16.56	8.37	17.35	14.40	16.88	2.58	0.98	0.06
Ogwen ...	13.67	15.58	0.00	19.52	14.64	47.62	2.82	3.25	0.43
URBAN DISTRICTS									
Bangor ...	16.64	15.97	12.35	11.79	12.38	33.33	1.53	0.83	0.00
Bethesda ...	18.14	20.32	25.64	11.93	11.69	52.63	2.63	0.95	0.24
Bettws-y-Coed ...	20.78	20.78	0.00	10.39	10.18	62.50	2.59	3.89	0.00
Caernarvon ...	17.94	17.94	24.10	11.96	11.84	0.00	2.55	0.78	0.22
Conway ...	15.32	16.70	5.85	17.48	14.86	23.53	2.97	2.16	0.09
Criccieth ...	22.15	23.92	0.00	18.35	13.95	0.00	3.79	0.00	0.00
Llandudno ...	11.53	12.11	24.63	16.31	13.21	15.15	3.09	1.39	0.00
Llanfairfechan...	10.92	12.99	0.00	13.65	11.19	0.00	2.39	1.02	0.00
Penmaenmawr ...	12.99	16.50	0.00	18.83	13.18	20.41	2.92	1.86	0.27
Pwllheli ...	14.13	15.54	37.73	20.49	15.37	19.61	2.77	1.39	0.00
Portmadoc ...	17.53	18.23	0.00	17.53	14.73	29.41	2.58	2.06	0.00
RURAL DISTRICTS ...	14.35	16.66	10.06	16.66	14.16	29.03	2.62	1.71	0.12
URBAN DISTRICTS ...	15.14	16.05	15.26	15.07	13.11	21.88	2.59	1.34	0.07
TOTAL COUNTY ...	14.83	16.31	13.26	15.71	13.51	24.64	2.61	1.49	0.09
ENGLAND AND WALES ...		18.0	18.1		11.9	21.4			

* Death Rate per 1,000 Live Births.

†Rate per 1,000 Total Live and Still Births.

BIRTHS AND BIRTH RATES

The number of live births registered in 1962 was 1,786 (934 males and 852 females), a rate of 14.83 per 1,000 of the population (adjusted rate 16.31). Stillbirths totalled 24 (13 males and 11 females), a rate of 13.26 per 1,000 of the total (live and still) births.

In the four Rural Districts, 689 live births were registered—a rate of 14.35 per 1,000 of the population (adjusted rate 16.66). The number of stillbirths was 7 (0.15 per 1,000 of the population).

In the eleven Urban Districts 1,097 live births (15.14 per 1,000 of the population) were registered (adjusted rate 16.05). There were 17 stillbirths (0.23 per 1,000 of the population).

The number of births and birth rates per 1,000 of the population in the various districts in the county during the last ten years are given in Table 3.

TABLE 3

Districts	1953		1954		1955		1956		1957		1958		1959		1960		1961		1962	
	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate	No. of Births	Birth Rate
RURAL DISTRICTS																				
Nant Conway	78	12.87	81	13.37	60	9.84	73	11.99	74	11.89	79	12.72	74	12.01	89	14.40	75	12.63	88	14.89
Gwyrfa	314	13.39	321	13.79	275	11.79	282	12.14	274	12.07	303	13.49	280	12.57	325	14.66	298	14.05	301	14.21
Lleyn...	244	14.18	206	11.93	202	11.75	215	12.60	198	11.69	178	10.53	209	12.44	215	12.82	213	13.08	237	14.53
Ogwen	100	20.39	70	14.20	68	13.76	66	13.41	78	15.95	57	11.80	59	12.29	45	9.35	59	12.97	63	13.67
URBAN DISTRICTS																				
Bangor	187	13.68	183	13.21	164	11.93	197	14.34	192	14.01	195	14.24	191	13.93	218	15.83	211	15.08	240	16.64
Bethesda	82	18.76	60	13.79	63	14.52	62	14.52	63	14.82	72	17.06	64	15.24	64	15.24	80	19.18	76	18.14
Bettws-y-Coed	17	23.00	12	16.00	17	28.67	11	14.67	10	13.33	18	24.32	13	17.57	15	20.27	11	14.67	16	20.78
Caernarvon	145	15.54	144	15.48	141	15.18	156	16.92	163	17.70	133	14.47	136	14.81	146	15.87	137	15.31	162	17.94
Conway	130	12.67	132	12.67	115	11.04	120	11.42	150	14.25	128	12.17	139	13.15	156	14.55	171	15.69	170	15.32
Cricieth	20	13.35	29	19.21	17	11.26	16	10.67	21	14.09	16	10.81	26	17.33	16	10.67	24	15.48	35	22.15
Llandudno	194	11.88	205	12.31	184	11.00	188	11.24	217	12.90	192	11.35	205	12.12	216	12.69	216	12.72	198	11.53
Llanfairfechan	43	14.12	42	13.68	42	13.73	36	11.84	21	6.97	29	9.73	41	13.80	37	12.50	41	13.90	32	10.92
Pennarmanawr	45	10.92	44	10.76	41	10.10	45	11.22	42	10.63	42	10.74	58	14.95	57	14.73	54	14.32	49	12.99
Pwllheli	46	12.29	46	12.23	53	14.13	60	16.04	52	13.94	63	16.98	41	11.14	63	17.17	59	16.30	57	14.13
Portmadoc	72	18.36	56	14.28	58	14.87	51	13.11	43	11.14	43	11.17	57	14.92	64	16.71	58	14.91	68	17.53
RURAL DISTRICTS																				
	736	14.26	678	13.16	605	11.73	636	12.40	624	12.29	617	12.24	622	12.43	674	13.50	645	13.44	689	14.35
URBAN DISTRICTS																				
	981	13.81	953	13.30	895	12.51	942	13.20	974	13.65	931	13.08	971	13.64	1,052	14.72	1,062	14.85	1,097	15.14
TOTAL COUNTY																				
	1,717	14.00	1,631	13.24	1,500	12.18	1,578	12.86	1,598	13.09	1,548	12.73	1,593	13.14	1,726	14.22	1,707	14.28	1,786	14.83
ENGLAND AND WALES...																				
		15.5		15.2		15.0		15.6		16.1		16.4		16.5		17.1		17.6		18.0

ILLEGITIMATE BIRTHS

One hundred and five illegitimate live births were registered in the county during 1962, representing a rate of 5.88 per cent of the total live births.

This table gives details of the illegitimate births in the various Sanitary Districts in the county :—

TABLE 4

District	Total Live Births	Number of Illegitimate Live Births	Percentage
RURAL DISTRICTS			
Nant Conway ...	88	4	4.55
Gwyrfaï	301	17	5.65
Lleyn	237	18	7.59
Ogwen	63	1	1.59
URBAN DISTRICTS			
Bangor	240	12	5.00
Bethesda	76	3	3.95
Bettws-y-Coed ...	16	1	6.25
Caernarvon	162	6	3.70
Conway	170	12	7.06
Criccieth	35	1	2.86
Llandudno	198	16	8.08
Llanfairfechan ...	32	3	9.37
Penmaenmawr ...	49	2	4.08
Pwllheli	51	7	13.73
Portmadoc	68	2	2.94
RURAL DISTRICTS ...	689	40	5.81
URBAN DISTRICTS ...	1,097	65	5.93
TOTAL COUNTY ...	1,786	105	5.88

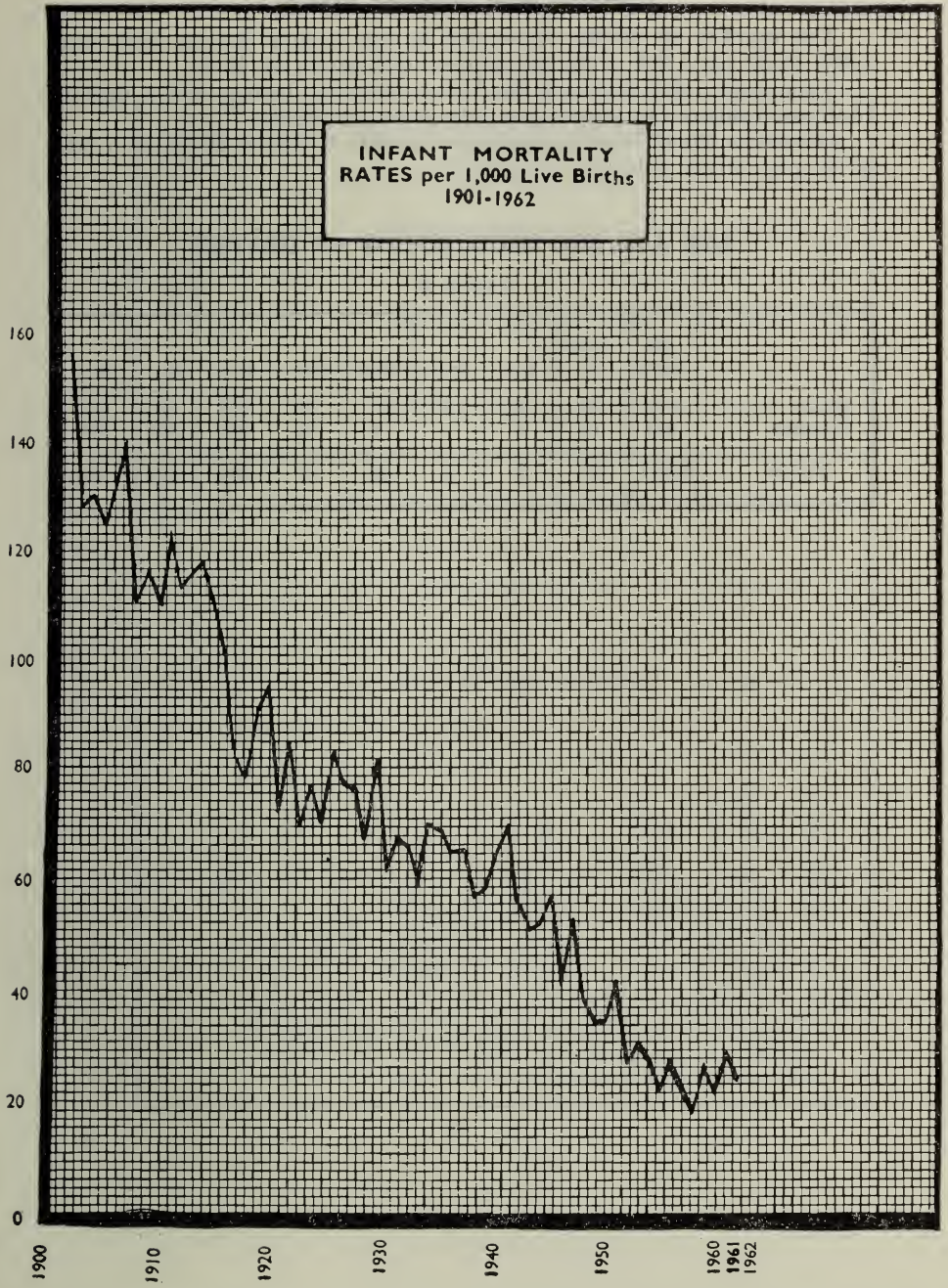
INFANT MORTALITY

Forty-four infant deaths (41 legitimate and 3 illegitimate infants) were recorded during 1962 (a rate of 24.64 per 1,000 live births). The graph on page 17 indicates the steady decrease in the infant mortality rate in Caernarvonshire since 1900, and the rate for 1958 was the lowest ever recorded in the County.

TABLE 5

CAUSES OF DEATHS OF INFANTS UNDER ONE YEAR OF AGE

Cause of Death	Number of Infant Deaths	Number of Neo-Natal Deaths	Number of Early Neo-Natal Deaths
CONGENITAL MALFORMATIONS			
Congenital heart disease	—	—	—
Congenital malformation of skull ...	—	—	—
Other congenital malformations ...	2	2	2
	2	2	2
DISEASES OF THE RESPIRATORY TRACTS			
Acute bronchitis	—	—	—
Bronchopneumonia	4	1	—
Atelectasis	1	1	1
Pneumonia congestion	2	—	—
Other respiratory conditions ...	1	—	—
	8	2	1
DISEASES OF THE GASTRO INTESTINAL TRACT			
Gastro-enteritis	2	—	—
	2	—	—
ACCIDENTS			
Inhalation of vomit	1	—	—
Suffocation—overlying	1	—	—
Post-operative death	—	—	—
	2	—	—
MISCELLANEOUS CAUSES			
Intracranial hæmorrhage	1	1	1
Hydrops foetalis	1	1	1
Urinary obstruction	1	—	—
Toxic hepatitis	1	—	—
Cerebral thrombosis	1	—	—
Meningitis—other than tubercular...	3	—	—
Anoxia	2	2	2
Adrenal failure	1	—	—
Cardiac failure	3	2	1
	14	6	5
PREMATURE INFANTS			
Prematurity	8	8	8
Prematurity plus atelectasis ...	6	6	6
Prematurity plus other diseases of respiratory tract	1	—	—
Prematurity plus intracranial hæmorrhage	1	1	1
	16	15	15
Totals	44	25	23
Mortality Rates (per 1,000 Live Births)	24.64	13.99	12.88



DEATHS AND DEATH RATES

The number of deaths registered in the county during 1962 was 1,892 (15.71 per 1,000 of the population) (adjusted rate 13.51).

There were 1,092 deaths in the Urban Districts during 1962, a rate of 15.07 per 1,000 of the population (adjusted rate 13.11).

Deaths in Rural Districts amounted to 800, a rate of 16.66 per 1,000 of the population (adjusted rate 14.16).

AGE AND SEX DISTRIBUTION OF DEATHS

TABLE 6

	All Ages	Under 1	1—	5—	15—	25—	45—	65—	75+
Males ...	978	26	4	8	11	26	252	304	347
Females ...	914	18	4	—	1	15	130	204	542
Totals ...	1,892	44	8	8	12	41	382	508	889

CAUSES OF DEATHS

TABLE 7

Cause of Death	Number of Deaths						Death Rates per 100,000 of the population
	Urban Districts		Rural Districts		Whole County		
	Males	Females	Males	Females	Males	Females	
1. Tuberculosis, respiratory ...	4	1	5	—	9	1	8.30
2. Tuberculosis, other ...	—	—	—	1	—	1	0.83
3. Syphilitic Disease ...	—	—	2	—	2	—	1.66
4. Diphtheria ...	—	—	—	—	—	—	0.00
5. Whooping Cough ...	—	—	—	—	—	—	0.00
6. Meningococcal infections ...	1	—	—	1	1	1	1.66
7. Acute Poliomyelitis ...	—	—	—	—	—	—	0.00
8. Measles ...	—	—	—	—	—	—	0.00
9. Other infective and parasitic diseases ...	2	—	1	—	3	—	2.49
10. Cancer of the Stomach ...	22	14	16	15	38	29	55.62
11. Cancer of the Lung Bronchus ...	31	4	21	1	52	5	47.32
12. Cancer of the Breast ...	—	18	—	8	—	26	21.58
13. Cancer of the Uterus ...	—	8	—	6	—	14	11.62
14. Other forms of cancer ...	44	47	33	26	77	73	124.52
15. Leukaemia, Aleukaemia ...	5	3	3	1	8	4	9.96
16. Diabetes ...	5	4	3	6	8	10	14.94
17. Vascular lesions of nervous system ...	71	102	70	81	141	183	268.97
18. Coronary disease—angina ...	117	73	99	35	216	108	268.97
19. Hypertension with heart disease ...	6	13	3	6	9	19	23.24
20. Other heart disease ...	54	108	34	74	88	182	224.14
21. Other circulatory disease ...	36	40	15	23	51	63	94.64
22. Influenza ...	—	2	—	2	—	4	3.32
23. Pneumonia ...	15	17	14	9	29	26	48.66
24. Bronchitis ...	37	13	22	13	59	26	70.56
25. Other diseases of respiratory system ...	13	—	19	3	32	3	29.06
26. Ulcer of stomach and duodenum ...	6	3	1	—	7	3	8.30
27. Gastritis, enteritis and diarrhoea ...	4	4	3	1	7	5	9.96
28. Nephritis and nephrosis ...	2	2	6	5	8	7	12.45
29. Hyperplasia of prostate ...	11	—	5	—	16	—	13.28
30. Pregnancy, childbirth and abortion ...	—	1	—	—	—	—	0.83
31. Congenital malformations ...	3	3	3	5	6	8	11.62
32. Other defined and ill-defined diseases ...	39	44	36	35	75	79	127.84
33. Motor vehicle accidents ...	9	3	5	2	14	5	15.77
34. All other accidents ...	9	12	7	9	16	21	30.72
35. Suicide ...	2	5	4	1	6	6	9.96
36. Homicide and operations of war ...	—	—	—	1	—	1	0.83
Totals ...	548	544	430	370	978	914	1,570.64

ZYMOTIC MORTALITY

TABLE 8

Disease	Number of Deaths	Death Rates per 100,000 of the Population	
		Caernarvon-shire	England and Wales
Diphtheria	Nil	0.0	0.0
Whooping cough	Nil	0.0	0.1
Meningococcal infections	2	1.66	0.3
Acute poliomyelitis	Nil	0.0	0.1
Measles	Nil	0.0	0.1
Other infections	3	2.49	—

DEATHS FROM MEASLES AND WHOOPING COUGH

FIVE YEARLY AVERAGES, 1926-1962

TABLE 9

Period	MEASLES		WHOOPING COUGH	
	Total Number of Deaths	*Average Death Rate	Total Number of Deaths	*Average Death Rate
1926—1930	32	4.60	66	10.20
1931—1935	15	2.40	28	4.20
1936—1940	17	2.70	26	3.80
1941—1945	3	0.46	29	4.20
1946—1950	3	0.48	12	2.04
1951—1955	1	0.16	6	0.96
1956—1960	1	0.80	Nil	0.00
1961	Nil	0.00	Nil	0.00
1962	Nil	0.00	Nil	0.00

*Rate per 100,000 population.

DEATHS FROM THE MAIN DISEASES ALLOCATED TO DISTRICTS

DEATH RATES PER 100,000 POPULATION

TABLE 10

Disease	Zymotic		Heart		Respiratory		Tuberculosis	
	No. of Deaths	Death Rate	No. of Deaths	Death Rate	No. of Deaths	Death Rate	No. of Deaths	Death Rate
RURAL DISTRICTS								
Nant Conway...	—	—	22	372	10	169	—	—
Gwyrfai ...	1	5	133	628	41	194	3	14
Lleyrn ...	1	6	101	619	16	98	1	6
Ogwen ...	—	—	33	716	15	325	2	43
URBAN DISTRICTS								
Bangor ...	2	14	76	527	12	83	—	—
Bethesda ...	—	—	16	382	4	95	1	24
Bettws-y-Coed	—	—	—	—	3	389	—	—
Caernarvon ...	—	—	49	543	7	78	2	22
Conway ...	—	—	70	631	24	216	1	9
Criccieth ...	—	—	15	949	—	—	—	—
Llandudno ...	1	6	117	681	24	139	—	—
Llanfairfechan	—	—	12	409	3	102	—	—
Penmaenmawr	—	—	28	743	7	186	1	27
Pwllheli ...	—	—	35	969	5	139	—	—
Portmadoc ...	—	—	29	747	8	206	—	—
RURAL DISTRICTS	2	4	289	602	82	171	6	12
URBAN DISTRICTS	3	4	447	617	97	134	5	7
TOTAL COUNTY	5	4	736	611	179	149	11	9

TABLE II
INFECTIOUS DISEASES

Incidence of Infectious Diseases (excluding Tuberculosis) in the Various Districts in the County during 1962

District	Scarlet Fever	Whooping Cough	Diphtheria	Measles	Pneumonia	Puerperal Pyrexia	Erysipelas	Other Diseases	Totals
RURAL DISTRICTS									
Nant Conway	—	—	—	6	—	—	—	—	6
Gwyrfa	9	—	—	14	—	—	—	21	44
Lleyn	—	—	—	28	—	—	2	1	31
Ogwen	6	—	—	34	2	—	1	2	45
URBAN DISTRICTS									
Bangor	5	—	—	274	—	9	—	1	289
Bethesda	15	—	—	16	—	—	—	20	51
Bettws-y-Coed	—	—	—	—	—	—	—	—	—
Caernarvon	5	—	—	8	1	—	—	33	47
Conway	5	—	—	65	—	—	—	1	71
Criccieth	—	—	—	34	1	—	—	—	35
Llandudno	2	1	—	52	7	—	—	2	64
Llanfairfechan	5	12	—	—	11	—	—	—	28
Penmaenmawr	1	—	—	9	—	—	—	—	10
Pwllheli	—	—	—	1	—	—	—	—	1
Portmadoc	—	—	—	7	—	—	—	—	7
Totals	53	13	—	548	22	9	3	81	729

Other diseases include :—

Chicken Pox	...	...	...	...	...	36
Dysentery and Food Poisoning	...	...	...	...	...	38
Acute Poliomyelitis	...	...	...	...	...	—
Meningococcal Infections	...	...	...	...	...	—
Typhoid and Paratyphoid	...	...	...	...	...	6*
Acute encephalitis	...	...	...	...	...	1

*Two of these related to persons normally residing outside the County.

TABLE 12

	Ophthalmia Neonatorum		Pemphigus Neonatorum		Puerperal Pyrexia	
	Domi- ciliary Confine- ments	Insti- tutional Confine- ments	Domi- ciliary Confine- ments	Insti- tutional Confine- ments	Domi- ciliary Confine- ments	Insti- tutional Confine- ments
Number of cases notified... ..	—	—	—	—	—	9
Number of cases visited by Officers of the Council	—	—	—	—	—	—
Number of cases for whom Home Nursing was provided... ..	—	—	—	—	—	—
Number of cases removed to hospital	—	—	—	—	—	—

TABLE 13

Incidence of Ophthalmia Neonatorum

AVERAGES (FIVE-YEAR PERIODS), 1926-1962

Period	Rate per 1,000 Live Births
1926-1930	2.75
1931-1935	2.57
1936-1940	3.70
1941-1945	2.20
1946-1950	0.50
1951-1955	0.12
1956-1960	0.56
1961	0.00
1962	0.00

CHAPTER 3

**CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN
UNDER SCHOOL AGE**

The Health Visitors and Midwives are concerned with the care of expectant and nursing mothers and children under 5 years of age.

Mothercraft clinics continue to be well attended, and a new clinic was established in Conway for expectant mothers living in Conway and Llandudno Junction. Mothers are showing increased interest in the help and instruction they receive at these clinics.

Attendances at the Pre-Natal Clinics are becoming excessively large in some areas. It has been necessary to arrange a weekly clinic in Portmadoc and for an additional doctor for the Llandudno Clinic. It is, however, gratifying to know that the mothers are anxious to make use of the facilities provided for them. Two Health Visitors and three or four Midwives attend each Pre-Natal Clinic session throughout the county.

Increasing emphasis is placed on the care of the expectant mother, and particular attention is given to her general health and preparing her for the birth of a baby.

The number of hospital confinements remains high, but those who have booked for confinement in hospital receive the necessary instruction, if they so desire, at the Mothercraft Clinics. Mothers who wish to be confined at home receive the necessary guidance individually in their homes from the domiciliary midwives if they are unable to attend the Mothercraft Clinics.

MOTHERCRAFT CLINICS

TABLE 14

Year	No. of Clinic Centres	No. of Sessions Monthly	No. of Mothers attending		Total Attendances
			No. of Mothers attending for first time	Total	
1953	8	16	231	262	886
1954	8	16	181	212	607
1955	8	16	141	160	576
1956	8	16	211	235	653
1957	8	16	224	280	886
1958	8	16	252	206	843
1959	9	18	253	304	997
1960	9	18	204	257	906
1961	10	22	280	349	998
1962	10	22	301	353	1,064

TABLE 15

Clinics	No. of Clinic Centres	No. of Sessions Monthly	No. of Mothers attending		Total Attendances
			No. of Mothers attending for first time	Total	
Pre-Natal 	5	18	1,139	1,533	6,577
Post-Natal 	5	18	215	224	293

Care of Unmarried Mothers

Health Visitors, District Nurses and Midwives notify me immediately of all unmarried expectant mothers in their areas, and submit their recommendations concerning the special needs of each one. Similar information is also obtained from Maternity Hospitals and Homes and the mothers are given every facility that the Council can offer in the care of their own and their children's health.

Arrangements may be made for a home or hospital confinement or the admission to a home for unmarried mothers such as Bersham Hall, Wrexham, established by the North Wales Councils in 1953.

The Bangor Diocesan Council for Moral Welfare continued to be important in the after-care of the unmarried mother and her child. The appointment of Dr. Slater to the Committee of the Adoption Society has provided the liaison with the Health Department.

The illegitimate birth rate for Caernarvonshire in 1962 was 59.12 per 1,000 total live and stillbirths.

After the birth of the baby, the mother and child are supervised by the Health Visitor.

If the mother decides that she wishes to place the child for adoption, she is advised to contact the Secretary of the Bangor Diocesan Council for Moral Welfare. The child then comes under the supervision of the Children's Officer, and by arrangement with her, the Health Visitor submits regular reports.

The District Nurse and Health Visitors are requested to report if they suspect an unmarried mother to be of low mentality. Frequent visiting is necessary to ensure the child is not neglected.

TABLE 16

Year	Mortality Rates per 1,000 Live Births	
	Legitimate Infants	Illegitimate Infants
1943	55.36	18.75
1944	53.88	49.18
1945	53.80	93.56
1946	41.68	46.78
1947	54.26	44.58
1948	39.95	23.43
1949	35.38	29.41
1950	35.20	35.29
1951	44.01	30.61
1952	25.94	72.29
1953	31.69	26.32
1954	29.62	12.82
1955	22.87	35.09
1956	27.92	40.54
1957	24.49	Nil
1958	18.34	39.47
1959	28.38	12.82
1960	24.52	10.53
1961	27.95	30.93
1962	24.39	28.57

Child Welfare

Health Visitors continue the supervision of the child and give advice to the mother from the period the midwife ceases to attend until the child is of school age. The frequency of visits by the Health Visitor will depend on the physical and mental health of the mother and child and the progress in the child's development.

In 1962 there were 40 Infant Welfare Centres in the county.

The Assistant School Medical Officers attend most of the clinics throughout the county, and examine every child periodically, and also deal with any abnormal condition, referring these children for further examination by the Paediatrician at centres held at Bangor, Llandudno and Pwllheli.

The Health Visitor also attends and, in the busy clinics, arrangements are made for two Health Visitors to attend. The District Nurse assists and usually undertakes the weighing of the children.

It has become necessary to arrange weekly clinic sessions in the Portmadoc area, and the attendances at the majority of clinics throughout the county are increasing. It is evident that the standard of care of young children has improved, and the majority of young mothers take a keen interest in the health and welfare of their children.

Voluntary committees still function in some of the areas in the county, and the voluntary workers continue to give faithful and invaluable service, particularly with the sale of welfare foods and assisting with some of the clerical work and the making of teas at the clinics. It is becoming more and more difficult to find voluntary workers who are prepared to undertake the making of teas. There is a very happy and congenial atmosphere, and a good team spirit amongst all those who attend and assist at the clinics.

Health Visitors prepare practical demonstrations each month, and much emphasis is placed on other visual aids in presenting education in health to the mothers and any member of the public who may attend the clinics.

There is much to be done with regard to clinic premises, and this is undoubtedly hampering the scope of the work that should be undertaken. The clinic premises in Llandudno Junction, Penmaenmawr and Sarn are unsatisfactory, and alternative premises are urgently required.

INFANT WELFARE CLINICS
TABLE 17

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendances			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
ABER C.M. Chapel Vestry	Monthly	2.30 p.m. to 3.30 p.m. 3rd Wednesday monthly	36	68	104	9	3	2	Health Visitor
ABERDARON Deunant School	Monthly	3.0 p.m. to 5.0 p.m. 3rd Friday monthly	88	98	186	19	16	1	Assistant M.O.H. Health Visitor
ABERSOCH Village Hall	Monthly	2.0 p.m. to 4.0 p.m. 3rd Wednesday monthly	126	188	314	26	15	—	Assistant M.O.H. and Health Visitor
BANGOR General Clinic, Sackville Road	Weekly	10.30 a.m. to 4.0 p.m. Every Thursday	2,457	1,422	3,879	48	182	25	Assistant M.O.H. and Health Visitor
BETHEL Memorial Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Fridays monthly	174	272	446	19	15	1	Health Visitor
BETHESDA Jerusalem Chapel Vestry	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Fridays monthly	508	300	808	35	54	15	Assistant M.O.H. and Health Visitor
BETTWS-Y-COED Memorial Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Wednesdays monthly	129	215	344	15	16	—	Assistant M.O.H. and Health Visitor

TABLE 17 (continued)

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendees			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
CAERNARVON Central Clinic, Sbtrehall Street	Weekly	2.0 p.m. to 4.0 p.m. Every Wednesday	1,923	426	2,349	46	154	5	Assistant M.O.H. and Health Visitor
CLYNNOG Village Hall	Monthly	2.0 p.m. to 4.0 p.m. 3rd Friday monthly	18	10	28	5	1	—	Health Visitor
CONWAY Murlau Buildings, Rosehill Street	Weekly	2.0 p.m. to 4.0 p.m. Every Tuesday	760	520	1,280	26	62	4	Assistant M.O.H. and Health Visitor
CRICCIETH Memorial Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Fridays monthly	306	161	467	21	41	—	Assistant M.O.H. and Health Visitor
DEGANWY Peniel Chapel Vestry	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Tuesdays monthly	361	202	563	24	40	6	Assistant M.O.H. and Health Visitor
DEINIOLLEN The Clinic, Deiniol Road	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Wednesdays monthly	421	355	776	34	40	3	Assistant M.O.H. and Health Visitor
DOLGARROG Church Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Thursdays monthly	293	335	628	26	18	—	Assistant M.O.H. and Health Visitor

TABLE 17 (continued)

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendances			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
GARDOLBENMAEN Primary School	Monthly	2.0 p.m. to 4.0 p.m. 1st Thursday monthly	62	47	109	10	13	1	District Nurse
GREAT ORME Primary School	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Mondays monthly	89	66	155	7	13	12	Health Visitor
GROESLON Village Hall	Monthly	2.0 p.m. to 4.0 p.m. 2nd Tuesday monthly	98	97	195	16	4	3	Assistant M.O.H. and Health Visitor
LLANBEDROG New Village Hall	Monthly	2.0 p.m. to 4.0 p.m. 2nd Wednesday monthly	77	133	210	18	11	—	Assistant M.O.H. and Health Visitor
LLANBERIS The Clinic, Capel Coch Road	Fortnightly	10.0 a.m. to 4.0 p.m. 1st and 3rd Wednesdays monthly	729	1,064	1,793	37	42	9	Assistant M.O.H. and Health Visitor
LLANDUDNO War Memorial Centre Oxford Road	Weekly	10.0 a.m. to 4.0 p.m. Every Tuesday	2,509	1,436	3,945	39	178	116	Assistant M.O.H. and Health Visitor
LLANDUDNO JUNCTION Y.W.C.A. Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Thursdays monthly	785	474	1,259	52	77	22	Assistant M.O.H. and Health Visitor

TABLE 17 (continued)

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendances			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
LLANFAIRFECHAN Horeb Chapel Vestry	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Thursdays monthly	345	374	719	30	34	5	Assistant M.O.H. and Health Visitor
LLANILLECHID Old Primary School	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Wednesdays monthly	219	338	557	23	17	3	Assistant M.O.H. and Health Visitor
LLANRUG Memorial Institute	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Thursdays monthly	263	300	563	23	13	—	Assistant M.O.H. and Health Visitor
MAESGEIRCHEN Youth Centre	Weekly	2.0 p.m. to 4.0 p.m. Every Monday	993	847	1,840	38	59	3	Assistant M.O.H. and Health Visitor
NEFYN Seion Chapel Vestry	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Thursdays monthly	468	442	910	33	53	17	Assistant M.O.H. and Health Visitor
PENMACHINO Public Hall	Monthly	2.0 p.m. to 4.0 p.m. 2nd Tuesday monthly	98	168	266	22	19	4	Assistant M.O.H. and Health Visitor
PENMAENNAWR Legion House, Esplanade	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Tuesdays monthly	302	230	532	23	33	1	Assistant M.O.H. and Health Visitor

TABLE 17 (continued)

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendances			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
PENRHOS W.I. Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Thursdays monthly	188	328	516	22	20	2	Health Visitor
PENRHYN BAY Penrhyn New Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Thursdays monthly	231	242	493	21	23	14	Assistant M.O.H. and Health Visitor
PENYCGROES Bethel Chapel Vestry*	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Tuesdays monthly	583	425	1,008	44	60	12	Assistant M.O.H. and Health Visitor
PORTDINORWIC Conservative Club	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Thursdays monthly	374	118	492	21	29	1	Assistant M.O.H. and Health Visitor
PORTMADOC Snowdon Street Clinic	Weekly	2.0 p.m. to 4.0 p.m. Every Tuesday	799	361	1,160	27	81	9	Assistant M.O.H. and Health Visitor
PWLLHELLI Mount Pleasant, Penlan Street	Weekly	2.0 p.m. to 4.0 p.m. Every Tuesday	997	645	1,642	35	74	7	Assistant M.O.H. and Health Visitor
RHOSTRYFAN Horeb Chapel Vestry	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Tuesdays monthly	189	189	378	16	21	2	Assistant M.O.H. and Health Visitor

* Temporary Accommodation

TABLE 17 (continued)

Clinic Centre	Sessions Held	Day and Time of Meetings	Total Attendances			Average Attendance per session	Number who attended for the first time		Clinic Attended by
			Under 1 year	Between 1 & 5 years	Total		Under 1 year	Between 1 & 5 years	
SARN Memorial Hall	Monthly	2.0 p.m. to 4.0 p.m. 1st Thursday monthly	72	115	187	16	6	—	Assistant M.O.H. and Health Visitor
TREGARTH Gelli Church Hall	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Wednesdays monthly	154	129	283	12	15	3	Assistant M.O.H. and Health Visitor
TREFOR Maes-y-Neuadd Vestry	Monthly	2.0 p.m. to 4.0 p.m. 3rd Thursday monthly	99	104	203	17	11	3	Assistant M.O.H. and Health Visitor
TREFRIW Peniel Chapel Schoolroom	Fortnightly	2.0 p.m. to 4.0 p.m. 1st and 3rd Mondays monthly	157	143	300	15	19	1	Health Visitor
UPPER LLANDWROG C.M. Chapel Vestry	Monthly	2.0 p.m. to 4.0 p.m. 3rd Thursday monthly	4	9	13	7	1	4	Health Visitor
WAUNFAWR Church Room	Fortnightly	2.0 p.m. to 4.0 p.m. 2nd and 4th Wednesdays monthly	172	205	377	16	9	—	Assistant M.O.H. and Health Visitor
Total			18,656	13,621	32,277		1,602	316	

CARE OF PREMATURE INFANTS

A comprehensive service is available for the care of premature infants, and excellent co-operation between the Medical and Nursing staffs of the St. David's Hospital and the Health Department ensures the efficiency of this service.

Premature Infant is a term used for a baby who weighs $5\frac{1}{2}$ lb. or under at birth.

All babies born at home who weigh under 4 lb. are immediately transferred into St. David's Hospital Premature Baby Unit. Special transport with a heated ambulance and cot is used. Occasionally the mother is also admitted. All babies weighing between 4 lb. and $5\frac{1}{2}$ lb. born in unsatisfactory homes are also transferred immediately into hospital.

Four special outfits for nursing premature infants weighing between 4 lb. and 5 lb. in their homes are retained at Caernarvon, Dolgarrog, Llandudno and Pwllheli, and additional outfits are retained in the St. David's Hospital. Each outfit has recently been overhauled and brought in line with the present requirements for the care of premature babies. All general practitioners and midwives are aware of the arrangements for obtaining the equipment when necessary.

The outfits consist of specially prepared cots fitted with heating and oxygen apparatus. Scales for test feeding and special clothing and equipment are also provided. All midwives have received special instructions in the care of premature babies. Table 18 shows the results of this service.

TABLE 18

Number and Place of Birth			Weight at Birth	Transferred to Hospital		Died in first 24 hours			Died between 2nd and 7th day			Died between 8th and 28th day			Survived 28 days			Total	
Home	N.H.	Total		Home	N.H.	Hospital		Home	N.H.	Hospital		Home	N.H.	Hospital		Home	N.H.		
						Hos.	Tr.			Hos.	Tr.			Hos.	Tr.				
—	—	9	3 lb. 4 oz. or less	—	—	—	5	—	—	—	—	—	—	—	—	—	3	—	9
—	—	16	3 lb. 4 oz.—4 lb. 6 oz.	—	—	—	5	1	—	—	—	—	—	—	7	—	3	—	16
—	—	26	4 lb. 6 oz.—4 lb. 15 oz.	—	—	—	1	—	2	—	—	—	—	—	20	—	3	—	26
4	—	60	4 lb. 15 oz.—5 lb. 8 oz.	—	—	—	2	—	1	—	—	—	—	1	49	—	7	—	60
4	—	107	Totals	—	—	—	13	—	4	—	—	—	—	2	76	—	16	—	111

NOTE : N.H. = Nursing Home. Hos. = Hospital. Tr. = Transferred from Home to Hospital.

PREVENTION OF BREAK-UP OF FAMILIES

The case conferences have continued to be held every alternate month to discuss problem families, and during the past twelve months seven conferences were held which dealt with 17 families. These conferences are attended by the Senior Assistant School Medical Officer, Superintendent Health Visitor, Health Visitors, Officers of the National Assistance Board, N.S.P.C.C. Inspector, District Medical Officer, Superintendent Education Welfare Officer, together with the Children's Officer and Child Care Officer.

In many of these cases either one or both parents are of low intelligence, and it is necessary to approach them on a level which they understand. Advice on the care of the children and the home must be given in detail and in the simplest possible terms.

Valuable assistance is given by the Health Visitors who visit regularly.

I am glad to be able to record that in 1962 the Neglected Children Panel achieved its aim in preventing the break-up of all the families which were brought before them for consideration. Court action was averted in every case which was dealt with by the panel.

It is gratifying to report that one family was re-housed by Gwyrfaï R.D.C., and the improvements in the home conditions have been so satisfactory that the family is no longer referred to the case conferences, but is still being supervised by the Health Visitor in the normal way.

Problem Families

Number of new cases referred to the Panel	...	7
Number of old cases considered by the Panel	...	10
Number of cases closed	... ..	8

DENTAL CARE

The post of Dental Officer in the Llandudno area was filled in September 1962, when the services of Mr. N. Livesey, L.D.S., were secured. The vacancy in this area had existed since 1954, despite repeated advertising. It will be appreciated, therefore, that it will require continuous and considerable effort to persuade parents and children to fully appreciate and accept the excellent and comprehensive dental services now provided for them, as has been achieved in other areas in the county.

A scheme for the treatment of expectant and nursing mothers was introduced in 1954 and is available free to mothers seeking treatment at the Council's dental clinics. Expectant and nursing mothers requiring dental treatment are referred for treatment by the Council's dental staff or, if they prefer, by their own private dentists.

This report on the work done in 1962 has been submitted by the Principal Dental Officer :—

“ To the County Medical Officer of Health.

DEAR SIR,

Nursing and Expectant Mothers

We have given dental treatment to all mothers who have requested appointments ; it is impracticable to extend this service at the moment in view of the overwhelming demand for treatment from children of school age and insufficient Dental Officers and staff to cope adequately with the demand.

The comparative table does, however, show a slight increase over the previous year.

	1961	1962
Cases started	13	19
Cases completed	4	9
Attendances for treatment ...	42	69
Extractions	12	2
Fillings	32	58
Local anaesthetics	15	20
General anaesthetics... ..	—	1
X-rays taken	1	2
Prophylactic cleaning	4	10
Impressions taken	4	11
Bite	1	3
Try in	1	4
Dentures inserted	2	6
Dressings, etc.	19	21

Children under Five Years of Age

The amount of work done for this category of patient, though still small, has doubled since last year. Treatment is often very slow, and considerable patience is needed.

Nineteen cases were treated under general anaesthetic during the year. Dr. H. Edwards manages these very young patients with great gentleness and skill.

	1961	1962
Cases started	45	90
Cases completed	34	72
Attendances	186	206
Extractions	66	54
Fillings	91	101
General anaesthetic	23	19
Silver nitrate application	190	115
Prophylactic cleaning	1	8
Dressings, etc.	42	27

Inspection, 1962

Number inspected...	...	...	451
Naturally sound ... ..	...	...	169
Artificially sound ... ..	...	...	41
Not referred ... ..	...	...	4
Referred ... ..	...	...	237

Children Under Five

Year	Number Examined	Number Referred	Number Treated	Silver Nitrate Treatment	Temporary Teeth Extracted	Temporary Teeth Filled	Local Anæsthetic	General Anæsthetic	X-Rays	Dentures Fitted
1948	1,290	371	90	—	80	65	—	12	—	—
1949	1,291	203	167	—	111	100	—	13	—	—
1950	1,172	241	54	—	24	43	—	—	—	—
1951	1,346	288	41	—	10	43	—	—	—	—
1952	1,535	312	67	—	21	45	—	5	—	—
1953	1,313	321	57	22	20	37	5	—	—	57
1954	677	209	35	19	16	23	—	—	1	35
1955	477	151	71	197	105	37	—	24	5	15
1956	349	150	49	128	42	59	12	18	—	39
1957	261	91	50	84	48	41	3	18	—	—
1958	442	160	53	117	25	91	1	11	1	43
1959	233	131	46	76	31	78	—	13	—	34
1960	431	219	47	95	68	116	—	25	2	—
1961	249	160	45	190	66	91	—	23	—	—
1962	451	241	90	115	54	101	—	19	—	—

Expectant and Nursing Mothers

Year	Permanent Teeth Extracted	Teeth Filled	Local Anæsthetic	General Anæsthetic	X-Rays	Impressions Taken	Dentures Fitted	Attendances
1948-1953	—	—	—	—	—	—	—	—
1954	4	6	4	—	—	—	—	6
1955	11	5	3	1	3	4	3	16
1956	19	75	31	4	14	18	3	79
1957	48	106	48	8	5	21	12	—
1958	23	58	41	3	4	11	4	80
1959	24	47	32	4	1	24	7	—
1960	42	63	37	3	6	6	3	90
1961	12	32	15	—	1	4	2	42
1962	2	58	20	1	2	11	6	69

Yours faithfully, D. McINTYRE.

OTHER SERVICES

Similar facilities are available to children of pre-school age as are offered to school children for consultation and treatment at the Orthopaedic, Ear, Nose and Throat, Ophthalmic, Orthoptic, Skin and Paediatric Clinics.

ORTHOPAEDIC TREATMENT

Children of pre-school age found to be suffering from orthopaedic defects at the Council's Clinics and those referred to the Department by their own doctors were examined by the consultant at the Orthopaedic Survey Clinics and received treatment by the Physiotherapist at the After-Care Clinics. Hospital treatment for those who required it was arranged through the Regional Hospital Board. Surgical fittings and modifications to footwear were also ordered by the Department and charged to the Hospital Board.

Ultra Violet Ray treatment was available at five centres to children referred by Assistant Medical Officers and the children whose private doctors requested treatment.

Details of the Survey-After-Care and Ultra Violet Ray Clinics are given in these tables :—

Orthopaedic Survey Clinics

TABLE 19

Centre	No. of Sessions	Number of Cases		Treatment Recommended				
		New	Old	Hospital	Appliances	Massage & S.R.E.	Observation	Others
Bangor ...	6	26	28	—	23	12	13	2
Caernarvon	6	27	51	—	35	16	19	2
Llandudno	6	18	23	1	27	8	2	2
Pwllheli ...	6	14	28	—	24	7	16	2
Totals...	24	85	130	1	109	43	50	8

After-Care Clinics

TABLE 20

Centre				No. of Sessions held	Total Attendances
Bangor ...	...	...	...	40	163
Caernarvon	...	...	...	40	155
Llandudno	...	...	...	41	148
Pwllheli ...	...	...	...	28	86
Portmadoc	...	...	...	41	58
Totals ...	...	...	...	190	610

Ultra-Violet Ray Clinics

TABLE 21

Centre	No. of Sessions held	Total Attendances
Bangor	34	—
Caernarvon	43	17
Llandudno	44	32
Pwllheli	25	—
Portmadoc	25	—
Totals	171	49

SPEECH THERAPY

Repeated advertising failed to secure the services of a qualified Speech Therapist during 1962, but Mrs. G. Robyns, who had resigned in December 1960, continued to hold two sessions weekly. A report on the work she performed is included in my School Annual Report.

AUDIOLOGY SERVICE

The purpose of this service is the early diagnosis, treatment and prevention of deafness.

Every baby is given the opportunity of having a screening test of hearing after the age of seven months, to ascertain if the hearing is developing normally, and to detect children who require further investigation.

Guidance to the parents of young deaf children has been given, as in previous years, under the supervision of the Senior Assistant Medical Officer and specially trained Health Visitors. Arrangements were made to lend a Speech Training Hearing Aid to parents, and this enables their children to have daily use of the machine. This has been of enormous benefit to young deaf children.

It is now the policy of Residential Schools for Deaf Children to encourage their deaf pupils to have as much contact as possible with the normal hearing community, and I am glad to say that this authority has ensured that two children are given this opportunity. One boy, aged five, is residing with his grandparents in Liverpool and attending the Liverpool School for the Deaf on a daily basis. A girl, aged six years, who attends the Royal Residential School for the Deaf at Manchester, spends every week-end with her grandparents.

It is hoped that the children will grow up able to communicate freely by speech and not gestures, to take their place in employment and in their leisure activities alongside the more fortunate hearing members of the community.

Children seen at Bangor Audiology Clinic, 1962

Total Number of Children Seen : 19

TABLE 22

	Under 5 years	Over 5 years
OLD CASES	4	9
NEW CASES	1	5
TOTAL	5	14
CAUSE OF REFERRAL		
Follow-up of cases seen previously	2	4
Deafness	2	5
Partially deaf	—	2
Suspected deafness	1	3
TOTAL	5	14
SOURCE OF REFERRAL		
Health Department	4	9
County Medical Officer of Health, Anglesey... ..	—	3
County Medical Officer of Health, Montgomeryshire	—	1
County Medical Officer of Health, Merionethshire	1	—
Mr. John Roberts, E.N.T. Specialist	—	1
TOTAL	5	14
DIAGNOSIS		
No deafness	1	2
Slight deafness	—	3
Partial deafness	2	8
Deafness	2	1
TOTAL	5	14
RECOMMENDATIONS		
For hearing aid and further tests	—	2
For hearing aid and training	3	1
For further tests	1	2
Forward placement in class	—	1
Forward placement in class and further tests... ..	—	3
Speech therapy and further tests	—	1
To see Dr. Aled Williams, E.N.T. Consultant	—	1
Refer to Child Guidance Clinic	—	1
For surgical treatment by Mr. Eiron Jones	—	1
For School for the Deaf	1	1
TOTAL	5	14

Schoolchildren Referred for Audiometric Testing—1962

TABLE 23

Centre	No. Invited	No. Seen	Failed to Attend
Bangor ...	23	18	5
Caernarvon ...	17	9	8
Llanberis ...	8	6	2
Llandudno ...	45	30	15
Pwllheli ...	22	14	8
Total ...	115	77	38

TABLE 24

	Ban- gor	Caer- narvon	Llan- beris	Llan- dudno	Pwll- heli	Total
SOURCE OF REFERRAL						
School Medical Officer ...	16	7	4	26	11	64
G.P. ...	—	1	—	—	—	1
Health Visitor ...	2	1	2	1	3	9
Head teacher ...	—	—	—	—	—	—
Paediatrician ...	—	—	—	3	—	3
Total ...	18	9	6	30	14	77
REASON FOR REFERRAL						
Suspected deafness... ..	4	2	—	17	3	26
For re-test	11	5	5	9	8	38
Poor speech	1	—	—	—	1	2
Otorrhoea	—	—	1	—	—	1
Otitis Media	—	1	—	—	—	1
Failed screening test ...	2	—	—	1	1	4
E.N.T. request	—	1	—	2	—	3
Transfer from other area ...	—	—	—	—	1	1
Catarrh	—	—	—	1	—	1
Total ...	18	9	6	30	14	77
RECOMMENDATIONS						
FOLLOWING TESTING						
For E.N.T. consultation ...	4	1	—	5	4	14
For audiology clinic ...	1	—	1	1	2	5
To see own doctor ...	—	—	—	1	1	2
For follow-up at school ...	2	—	2	4	—	8
To sit in front of class ...	1	—	—	—	—	1
For I.Q.	—	1	—	2	—	3
For speech therapy ...	1	—	—	—	—	1
For re-test	6	6	—	10	4	26
No further action ...	3	1	3	7	3	17
Total ...	18	9	6	30	14	77

Screening Tests of Children under Five Years of Age, 1962

Number of children tested during routine visits	692
Number of children re-tested from 1961	7

Total	699
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Number of children found to have satisfactory hearing	665
Number of children found to have unsatisfactory hearing	34

Total	699
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Number of children found to have satisfactory hearing on re-test	...	22
Number of children for further tests	...	1
Number of children listed as backward babies	...	1
Number of children with satisfactory hearing on second re-test	...	1
Number of children awaiting re-test as at 31st December, 1962	...	9

Total	34
-------	-----	-----	-----	-----	-----	-----	-----	----

PRE- AND POST NATAL CLINICS

TABLE 25

Year	Number of Women who Attended		Total Attendances
	Pre-Natal Clinic	Post-Natal Clinic	
1939	278	44	644
1940	368	133	1,038
1941	784	213	2,203
1942	839	336	2,915
1943	1,127	318	3,953
1944	1,090	478	4,658
1945	945	468	4,426
1946	1,384	479	6,128
1947	1,325	571	6,647
1948	1,878	528	8,959
*1949	976	253	4,640
*1950	1,002	462	4,509
*1951	983	528	4,566
*1952	1,064	468	4,882
*1953	1,088	252	4,456
*1954	1,025	240	4,500
*1955	941	233	4,109
*1956	930	186	3,956
*1957	1,082	211	4,507
*1958	1,136	223	4,757
*1959	1,246	194	5,023
*1960	1,382	286	5,761
*1961	1,446	214	5,970
*1962	1,533	224	6,870

* Does not include attendances at the St. David's Hospital

CAUSES OF NEO-NATAL DEATHS

England and Wales 1961

TABLE 26

Causes of Neo-Natal Deaths	England & Wales, 1961	
	Per Cent	Rate per 1,000 Live Births
All infective and parasitic diseases	0.13	0.02
Bronchitis	0.20	0.03
Pneumonia	5.67	0.87
Diarrhoea of newborn	0.52	0.08
Immaturity	23.99	3.68
Congenital malformations	18.25	2.80
Asphyxia and atelectasis	21.06	3.23
Congenital debility and other ill-defined diseases of early infancy	3.52	0.54
Other causes	26.66	4.09
All causes	100.0	15.34

NEO-NATAL DEATHS

TABLE 27

Year	No. of Neo-Natal Deaths	Rate per 1,000 Live Births
1933	68	41.2
1934	71	44.5
1935	78	47.2
1936	67	42.0
1937	70	43.3
1938	68	41.5
1939	66	39.8
1940	56	35.2
1941	78	44.6
1942	68	35.0
1943	69	35.7
1944	71	36.4
1945	63	37.1
1946	55	26.9
1947	64	29.3
1948	39	19.9
1949	37	19.9
1950	38	21.58
1951	36	20.76
1952	30	17.62
1953	29	16.89
1954	36	22.07
1955	17	11.33
1956	31	19.65
1957	29	18.15
1958	20	12.92
1959	31	19.46
1960	35	20.28
1961	40	23.43
1962	25	14.00

EARLY NEO-NATAL MORTALITY

(Deaths under one week) Rate per 1,000 Live Births

Particulars of infant deaths at ages of less than one week were issued by the Registrar General to local medical officers of health for the first time in 1959.

The number of such early neo-natal deaths assigned to this county in 1962 was 23 (a rate of 12.88 per 1,000 live births), and representing 92.00 per cent of all neo-natal deaths and 52.27 per cent of total infant deaths.

Early Neo-Natal Mortality

TABLE 28

Year	No. of Early Neo-Natal Deaths	Rate per 1,000 Live Births
1959	21	13.18
1960	32	18.54
1961	31	18.16
1962	23	12.88

PERI-NATAL MORTALITY RATES FROM 1938

TABLE 29

Year	No. of Live Births	No. of Still Births	No. of Infants who died under one week of age	Total Still Births and Deaths of Infants under one week of age	Peri-Natal Mortality rate per 1,000 Total Live and Still Births	Rates for England and Wales
1938	1,636	92	47	139	80.44	58.6
1939	1,657	77	40	117	67.47	58.5
1940	1,589	82	43	125	74.81	57.7
1941	1,747	66	57	123	67.84	54.7
1942	1,942	96	39	135	66.24	52.1
1943	1,930	61	46	107	53.74	47.9
1944	1,946	60	46	106	52.84	44.5
1945	1,695	48	41	89	51.06	45.2
1946	2,042	54	35	89	42.46	44.3
1947	2,184	55	43	98	43.77	40.2
1948	2,005	51	35	86	41.83	38.5
1949	1,854	45	30	75	39.49	38.0
1950	1,761	39	34	73	40.55	37.7
1951	1,734	46	29	75	42.13	38.1
1952	1,702	44	26	70	40.09	37.5
1953	1,717	45	26	71	40.29	37.0
1954	1,631	45	32	77	45.94	38.1
1955	1,500	31	15	46	30.36	37.6
1956	1,578	34	25	59	36.60	36.8
1957	1,598	39	24	63	38.48	36.2
1958	1,548	34	18	52	32.87	35.1
1959	1,593	36	21	57	34.99	34.2
1960	1,726	49	32	81	45.63	32.9
1961	1,707	38	31	69	39.54	32.2
1962	1,786	24	23	47	25.97	30.8

PERI-NATAL MORTALITY RATES FROM 1938

(Five-yearly periods)

TABLE 30

Period	No. of Live Births	No. of Still Births	No. of Infants died under one week of age	Total Still Births and Deaths of Infants under one week of age	Peri-Natal Mortality Rate per 1,000 total Live and Still Births	Average Rate England and Wales
1938-1942	8,571	413	226	639	71.1	56.3
1943-1947	9,797	278	211	489	48.5	44.4
1948-1952	9,056	225	154	379	40.8	37.9
1953-1957	8,024	194	122	316	38.5	37.1
1958-1962	8,360	181	125	306	35.8	33.0

STILLBIRTH RATES OF WHOLE COUNTY

TABLE 31

Year	Stillbirths	Rate per 1,000 Total Births
1933	100	57.1
1934	89	52.9
1935	87	50.0
1936	83	49.4
1937	86	50.5
1938	92	53.2
1939	77	44.4
1940	82	49.0
1941	66	36.4
1942	96	47.1
1943	61	30.6
1944	60	29.9
1945	48	27.5
1946	54	25.8
1947	55	24.5
1948	51	24.8
1949	45	23.7
1950	39	21.6
1951	46	25.8
1952	44	25.2
1953	45	25.54
1954	45	26.85
1955	31	20.25
1956	34	21.09
1957	39	23.82
1958	34	21.49
1959	36	22.10
1960	49	27.61
1961	38	21.78
1962	24	13.26

ST. DAVID'S HOSPITAL, BANGOR

I have received this report from Mr. O. V. Jones, the Consultant Obstetrician :—

Caernarvonshire Cases

Obstetrics

Maternity admissions	1,336
Number of deliveries (including Stillbirths)	1,051
Neo-natal deaths	19
Neo-natal deaths (born before admission)	1
Stillbirths	20
Maternal deaths	1

Causes of Neo-natal Deaths

Born in Hospital :

Asphyxia	1
Anencephaly	1
Anoxia	3
Bronchopneumonia	1
Hydrops foetalis	1
Mother diabetic. Poor condition	1
Extreme prematurity	1
Prematurity	4
Prematurity plus atelectasis	3
Prematurity plus placenta prævia	1
Prematurity plus antepartum hæmorrhage	1
Prematurity plus subarachnoid and subdural hæmorrhage	1

Born before admission :

Extreme prematurity	1
----------------------------	---

Causes of Stillbirths

Hydrops foetalis	1
Anencephaly	3
Vasa prævia	1
Accidental hæmorrhage	1
Intra-uterine death	7
Prematurity	1
Macerated	5
? (post-mortem not allowed)	1

Cause of Maternal Death

Hepato-renal failure due to obstetric acute yellow atrophy. Delivered ...	1
---	---

Peripheral Clinics, Caernarvonshire

	Maternity			Gynaecology		Total
	New	Old	Post-natal	New	Old	
Caernarvon	265	1,624	113	1	2	2,005
Portmadoc	216	630	24	3	1	874
Penygroes	85	276	28	—	—	389
Pwllheli	230	969	55	97	132	1,483
Llandudno	323	1,898	58	12	7	2,298
Total	1,119	5,397	278	113	142	7,049
St. David's Hospital Ante-Natal Clinic Attendances*	702	3,518	327	10	5	4,562

*These figures include attendances by Anglesey patients.

205 Normal deliveries.

3 Forceps deliveries.

Nil Stillbirths.

1 Neo-natal death (myocardial failure due to cor bilocularis).

35 Transferred to St. David's Hospital (30 ante-natal, 5 post-natal)

1 Transferred to C. and A. Hospital (died second day).

93 Post-natals from St. David's Hospital.

4 Babies transferred to St. David's Hospital Premature Unit.

OXFORD ROAD MATERNITY HOME, LLANDUDNO

Total admissions 198

Total number of deliveries 83

Total normal cases 79

Total forceps deliveries 4

Blood transfusions 2

Stillbirths 0

Patients transferred from St. David's Hospital ... 89

Patients transferred to St. David's Hospital ... 9

NURSING HOMES

Three Nursing Homes were registered at the end of December 1962 :—

Nursing Home	No. of Patients	Names of Persons Registered
CERIS NURSING HOME, Bangor	21	Mrs. Jane Ellen Owen
SANDFORD NURSING HOME, Llandudno	16	Capt. Raymond Herbert Green Mrs. Joan Winifred Green
RYDAL NURSING HOME, Penrhyn Bay, Llandudno.		Mrs. Maria Jane Davies

CARE OF CHILDREN

Very close liaison has again been maintained between the Children's Department and the Health Department.

Children at the Blodwel Children's Home are examined and supervised by the Senior Assistant Medical Officer. The Residential Nursery in Llandudno has accommodation for fifteen babies, and is visited regularly by the Senior Assistant Medical Officer of Health.

There is close liaison between the Health Department and the Children's Department in the arrangements made for the adoption of children. The advice of the Department is sought by the Children's Officer concerning the suitability of prospective parents, and the Health Visitors make supervisory visits to all the babies who have been placed for trial before actual adoption.

The Children's Officer has expressed appreciation of the valuable assistance she has received from the Department.

School Medical Officers pay special attention during school medical inspections to children in the care of the Children's Committee.

CHAPTER 4

MIDWIFERY

I maintain medical supervision of midwives and the Superintendent Nursing Officer is responsible for the supervision of all midwives employed by the County Council, midwives in private practice, and those employed in private nursing homes and in hospitals. She is responsible for the general practice of midwives and undertakes the necessary investigations relating to the rules of the Central Midwives' Board. This is a statutory body governing the practice of every midwife and the Supervisor must be satisfied that every rule is observed.

There are three full-time midwives and forty-nine part-time midwives on the staff. The pattern of midwifery service is changing, and there is an increasing number of mothers who wish to have their confinement in hospital. However, the number of these mothers who are discharged early after their babies are born is increasing ; consequently the pressure on the domiciliary midwives is becoming heavier.

Greater emphasis continues to be made on more visits to the expectant mother by the domiciliary midwife when the mother is given advice and instruction in mothercraft, ante-natal exercises and relaxation. The midwives continue to visit the mother and baby for two weeks after confinement.

Midwives are expected to attend lectures and staff meetings regularly so as to keep abreast with new developments and county policy. They are also required to attend Post-Graduate courses arranged by the Royal College of Midwives at various University centres throughout the country.

Midwifery equipment is maintained at a high standard, and it is hoped that further Trilene apparatus can be purchased during 1963.

All midwives in the county are qualified to administer gas and air analgesia, and there are forty-three sets of apparatus provided for their use. In 1962 gas and air analgesia was administered to 160 mothers—in 83 instances when the doctor was not present at the time the child was born.

All midwives have also received full instructions in the administration of pethidine and the conditions under which it is obtained and used. Pethidine was given to 131 mothers in 1962.

Midwives made 4,017 attendances on 695 mothers who were discharged from maternity hospital before the tenth day, and 2,309 visits to 614 mothers discharged between the tenth and fourteenth day.

Maternity outfits of an approved type are issued to midwives, and 352 were given free of charge to mothers confined at home in 1962.

Medical aid was summoned on five occasions during 1962—in all instances where the medical practitioner had arranged to provide the patient with Maternity Medical Services.

It is compulsory for each midwife to attend a Post-Graduate course every five years. Fourteen midwives attended such courses during 1962. Every midwife also attends a special course on the Teaching of Parentcraft and Relaxation. This additional course prepares them for their work at the Mothercraft Clinics.

A high standard of maternity care is maintained throughout the county, and the midwives work in very close co-operation with the general practitioner Obstetricians. Four midwives attend the Pre-Natal Clinics in various parts of the county, and these clinics continue to be well attended. The majority of the mothers attended have booked for their confinement in hospital, but general practitioner Obstetricians are also advised to send expectant mothers who have booked for home confinement to the Clinic periodically for consultation.

TABLE 32
(1) Midwives

Midwives	Number Practising		
	Domiciliary Midwives	Midwives in Institutions	Total
(a) Employed by the County Council	52	—	52
(b) Employed by voluntary organisations :			
(i) Under arrangements with the Council	—	—	—
(ii) Otherwise	—	—	—
(c) Employed by the Hospital Management Committee	—	32	32
(d) In private practice (including Maternity Homes)	—	1	1
Totals	52	33	85

(2) Confinements Attended During 1962

	Domiciliary Confinements				Totals	Births in Institu- tions
	Doctor not Booked		Doctor Booked			
	Doctor present at delivery	Doctor not present	Doctor present at delivery	Doctor not present		
Midwives employed by the Council... ..	2	11	149	148	310	—
Midwives employed by the Hospital Management Com- mittee	—	—	—	—	—	2,103
Midwives in private practice, including Nursing Homes ...	—	—	1	—	1	1
Totals	2	11	150	148	311	2,104

Tables Nos. 32, 33 and 34 illustrate the service provided.

TABLE 33
Midwifery and Maternity Cases

Period January- December	Number of Cases Nursed Entirely at Home	Number of Attendances	Number of Attendances per Case
1950	528	14,732	28
1951	498	15,494	31
1952	445	14,450	32
1953	487	15,810	32
1954	442	13,477	30
1955	299	9,214	30
1956	335	10,614	31
1957	284	8,601	31
1958	338	9,802	29
1959	310	9,361	30
1960	336	9,803	29
1961	367	10,869	30
1962	310	9,231	30

Although the number of cases confined at home shows a reduction from 528 in 1950 to 310 in 1962, the duties of the midwives have not been correspondingly reduced because of the additional pre- and post-natal home attendances and the additional attendances of staff at pre- and post-natal Mothercraft clinics. It should be emphasised that statutory attendances have to be paid to mothers discharged from hospital before the tenth day. Details of these are given in Table 34, from which it will be seen that the number of such cases have multiplied almost five times since 1950.

TABLE 34
Discharged Hospital Cases and Miscarriages

Period Jan. to Dec.	Miscarriages			Cases confined in Hospital but discharged home before the 10th day		
	Cases	Attendances	Attendances per Case	Cases	Attendances	Attendances per Case
1950	62	416	7	371	1,395	4
1951	41	247	6	641	2,434	4
1952	30	265	9	819	3,139	4
1953	36	309	9	821	2,908	4
1954	29	143	5	943	2,978	3
1955	32	271	8	939	3,387	3
1956	12	104	9	999	3,400	3
1957	19	156	8	1,079	3,699	3
1958	16	66	4	1,054	3,927	4
1959	26	135	5	1,102	4,662	4
1960	18	93	5	1,215	5,545	5
1961	14	99	7	1,232	5,510	4
1962	12	65	5	1,309	6,326	5

Particulars of attendances by District Nurse/Midwives at half-day sessions at the various clinics are given in Table 35.

TABLE 35

	Period : January-December
Pre-Natal Clinics	797
Infant Welfare Clinics	1,069
Midwives' Clinics	605
School Medical Inspections ...	4

CHAPTER 5

HEALTH VISITING

This service was performed by twenty-five Health Visitors under the supervision of the County Superintendent. One District Nurse Midwife, for whom dispensations were granted by the Ministry of Health, acted as part-time Health Visitor in an area where there was no full-time Health Visitor.

The areas now provided with full-time Health Visitors are much too large and consequently the multifarious duties which they have to perform have to be seriously curtailed.

It is necessary to appoint several more Health Visitors if we are to undertake a full programme of health education as desired. This important aspect of their work cannot be over-emphasised as the future success and the improved health of the community depends largely on the knowledge and information that can be imparted to the people so that they will be in a more able position to prevent illness where at all possible.

More education is necessary in order that more people avail themselves of the services offered by the County Council. Many more children and young people should be immunised against poliomyelitis and tuberculosis.

Due to the pressure of work, Health Visitors continue to exercise selective visiting of young children so that they can devote their time to the most urgent problems.

Mothers' Clubs continue to function very satisfactorily, and a considerable amount of educational work is undertaken.

It is necessary to commence educating the adolescent before leaving school, and it is hoped to develop this work as soon as a sufficient number of staff is available.

In addition to health visiting, the health visitors continue to undertake school nursing duties, and devote a considerable time to the health of schoolchildren.

TABLE 36

Number of attendances on children under one year of age :							
First attendances	...	...	...	...	...	...	1,672
Total attendances	...	...	...	...	...	...	17,747
Number of attendances on children between 1 and 5 years of age :							
First attendances	...	...	...	...	...	...	149
Total attendances	...	...	...	...	...	...	21,560
Number of other attendances :							
Housing and sanitation	...	...	...	...	...	...	66
Mental defectives	...	...	...	...	...	...	351
Home conditions of children	...	...	...	...	...	...	268
Old people	...	...	...	...	...	...	2,026
General illness	...	...	...	...	...	...	246
Tuberculosis	...	...	...	...	...	...	3,129
Infectious diseases	...	...	...	...	...	...	1,051
Miscellaneous attendances	...	...	...	...	...	...	1,860
Number of attendances (half-day sessions) at :							
Pre- and Post-natal Clinics...	...	...	...	...	...	...	325
Infant Welfare Clinics	...	...	...	...	...	...	1,481
Other Clinics	...	...	...	...	...	...	904
School Health Services :							
Attendances at Medical Inspections	...	...	...	...	...	...	405
Visits following Medical : to homes	...	...	...	...	...	...	128
Inspections : to schools	...	...	...	...	...	...	39
General health and hygiene inspections : at schools	...	...	...	...	...	...	650
Visits following general health and hygiene inspections : to homes	...	...	...	...	...	...	484
Other visits : to homes	...	...	...	...	...	...	1,406
to schools	...	...	...	...	...	...	795
Minor ailments treated	...	...	...	...	...	...	55
Number of attendances for treatment	...	...	...	...	...	...	80

Phenylketonuria

This is a disease which affects the brain at a very early age and if it is left undiagnosed and untreated it can lead to permanent brain damage. An indication of the existence of this disease can be easily obtained by a very simple urine test, preferably made when the child is between four and six weeks old, and if the diagnosis is confirmed dietary treatment should commence immediately.

A scheme of routine testing was introduced in March 1961, and by December 1962 the Health Visitors had made 2,363 such tests. No positive reactions were obtained.

CHAPTER 6

HOME NURSING

Seven full-time and forty-nine part-time Home Nurses were employed during 1962. The part-time Home Nurses also performed duties as District Midwives and assisted at clinics.

More and more emphasis is placed on Geriatric nursing, and most of the work of the Home Nurse is concerned with the older members of the community. Their duties also consist of rehabilitating the patient as early as possible and recommending the necessary gadgets and medical loans that will help the individual to maintain as much independence as possible.

The services of the District Nurses are utilised fully throughout the county and, with the present emphasis on community care, no doubt the pressure on the Home Nurse is likely to increase.

The number of cases where late night visits are necessary vary from time to time in different districts, but patients suffering from carcinoma constitute the majority of those who require a late night visit.

Home Nurses are encouraged to attend Post-Graduate courses, and two attended such courses during 1962.

Details of the work performed during the year are given in Table 37.

TABLE 37

Type of Case Attended	Analysis of Cases			Total Attendances during the year
	No. on Register at the beginning of the year	No. of New Cases during the year	No. on Register at the end of the year	
Surgical	150	991	121	20,582
Medical	837	3,417	969	110,261
Infectious Diseases	—	5	—	27
Tuberculosis ...	7	29	4	1,484
Other	12	633	15	1,568
Totals	1,006	5,075	1,109	133,922

TABLE 38
Home Nursing

Period January— December	Number of Cases	Number of Attendances	Attendances per Case
1950	7,018	97,989	14
1951	10,447	115,609	11
1952	9,856	120,778	12
1953	10,415	130,058	12
1954	10,576	132,733	13
1955	10,858	141,350	13
1956	10,435	143,631	14
1957	8,164	138,324	17
1958	7,526	127,407	17
1959	7,009	129,329	18
1960	6,143	128,805	21
1961	6,048	136,576	23
1962	6,081	133,922	22

CHAPTER 7

VACCINATION AND IMMUNISATION

Arrangements for performing vaccination and immunisation continued.

Continued persuasion and teaching by the Medical and Nursing staffs over the last few years has, I am glad to say, increased the number of children vaccinated, and it is gratifying to see a steady increase in this figure annually. Still greater efforts must be made, however, to ensure that a much larger proportion of the children born in the county are vaccinated. The general practitioners are also supporting this campaign.

Table 39 gives details of the vaccinations performed during the period 1948 to 1962.

TABLE 39

Year	Number of Children	Age at time of Vaccination				Total
		Under 1	1-4	5-14	Over 15	
1948	Vaccinated ...	289	21	4	13	327
(July-Dec.)	Re-vaccinated ...	9	—	6	49	64
1949	Vaccinated ...	629	51	16	71	767
	Re-vaccinated ...	8	6	11	107	132
1950	Vaccinated ...	434	397	37	61	929
	Re-vaccinated ...	25	5	15	161	206
1951	Vaccinated ...	500	421	28	61	1,010
	Re-vaccinated ...	3	3	17	180	203
1952	Vaccinated ...	487	394	31	68	980
	Re-vaccinated ...	—	5	14	173	192
1953	Vaccinated ...	613	260	41	61	975
	Re-vaccinated ...	—	3	8	144	155
1954	Vaccinated ...	592	256	59	38	945
	Re-vaccinated ...	—	3	6	82	91
1955	Vaccinated ...	831	50	54	66	1,001
	Re-vaccinated ...	—	6	23	131	160
1956	Vaccinated ...	906	49	13	47	1,015
	Re-vaccinated ...	—	4	18	170	192
1957	Vaccinated ...	904	58	35	50	1,047
	Re-vaccinated ...	—	8	17	187	212
1958	Vaccinated ...	949	43	37	68	1,097
	Re-vaccinated ...	—	5	10	178	193
1959	Vaccinated ...	866	32	27	55	980
	Re-vaccinated ...	—	1	22	95	118
1960	Vaccinated ...	826	61	23	42	952
	Re-vaccinated ...	—	2	16	111	129
1961	Vaccinated ...	1,164	61	21	65	1,311
	Re-vaccinated ...	—	1	13	144	158
1962	Vaccinated ...	874	422	777	739	2,812
	Re-vaccinated ...	—	78	1,174	8,061	9,313

Immunisation

Immunisation against diphtheria was performed by the Council's Assistant Medical Officers and by General Practitioners. The number of children who completed the full course of immunisation in 1962 was 994, of whom 400 were immunised by Assistant Medical Officers and 594 by General Practitioners.

The remarkable success of the scheme since it was first introduced in the county in 1939 is shown in Table 40, but it is important to ensure that the almost complete eradication of this disease in recent years is not interpreted by parents as an indication that diphtheria immunisation is no longer necessary.

Triple antigen giving protection against Diphtheria, Whooping Cough and Tetanus was introduced in March 1962, and 969 children were given this vaccine during the year.

**Percentage of Children (0-15 Years of Age)
Immunised against Diphtheria 1949-1962**

Year	Percentage
1949	66.7
1950	66.02
1951	67.44
1952	68.39
1953	71.49
1954	71.28
1955	72.25
1956	72.18
1957	72.28
1958	70.80
1959	69.98
1960	70.52
1961	70.45
1962	66.12

Number of Children Immunised against Whooping Cough in 1962

Year of Birth	No. of Children
1962	192
1961	535
1960	155
1959	47
1958	15
1953-1957	22
1948-1952	3
Total	969

TABLE 40

DIPHTHERIA—INCIDENCE AND MORTALITY
Rates per 100,000 Population

Year	Incidence		Mortality	
	Cases Notified	Attack Rate	Deaths	Death Rate
1939	202	169	8	7
1940	175	137	10	8
1941	204	143	10	6
1942	242	176	8	7
1943	159	120	3	2
1944	85	67	3	2
1945	91	74	3	3
1946	19	15	1	1
1947	19	15	—	—
1948	18	14	—	—
1949	2	1.6	—	—
1950	1	0.8	1	0.8
1951	2	1.6	—	—
1952	—	—	—	—
1953	—	—	—	—
1954	—	—	—	—
1955	—	—	—	—
1956	—	—	—	—
1957	1	0.82	—	—
1958	—	—	—	—
1959	—	—	—	—
1960	—	—	—	—
1961	—	—	—	—
1962	—	—	—	—

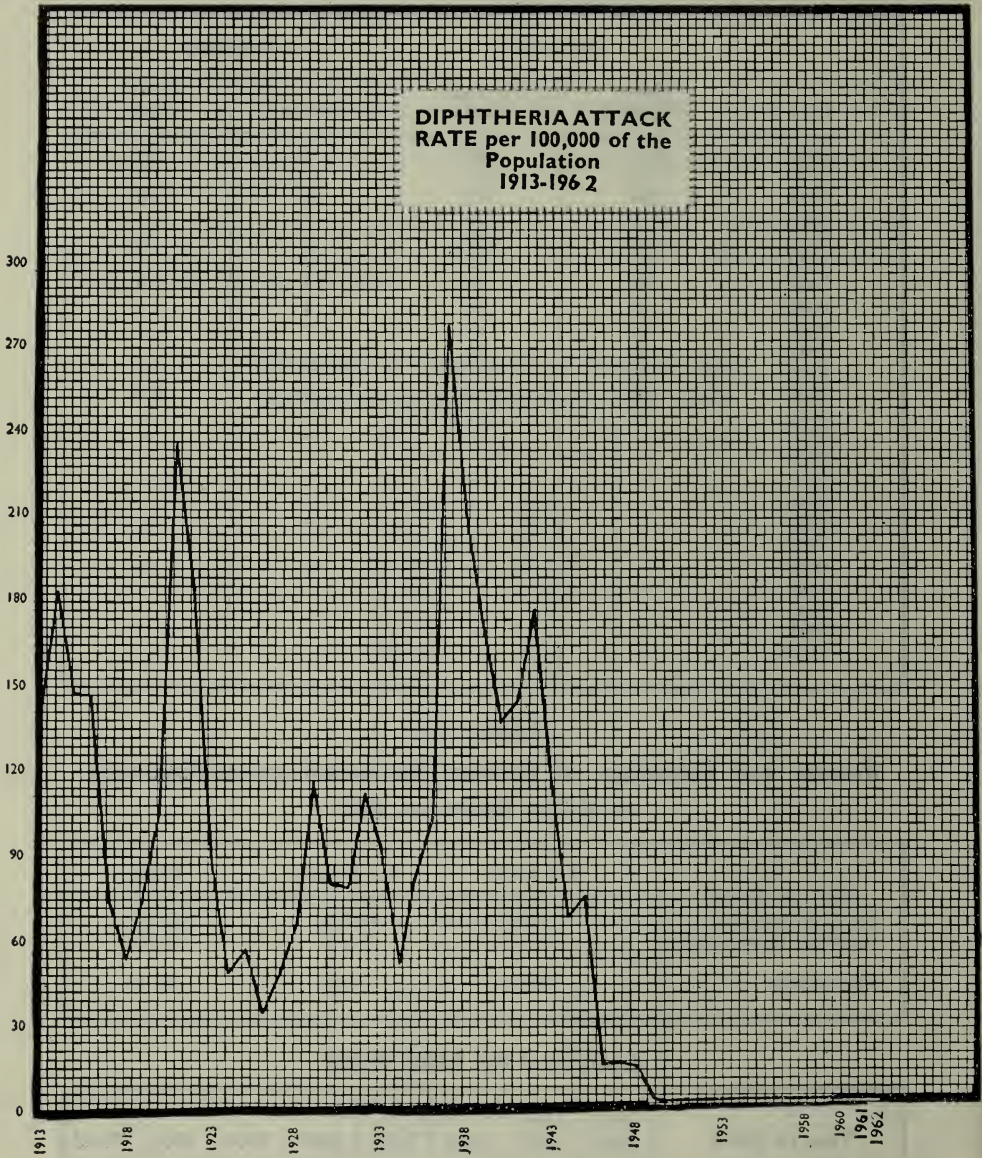
TABLE 41

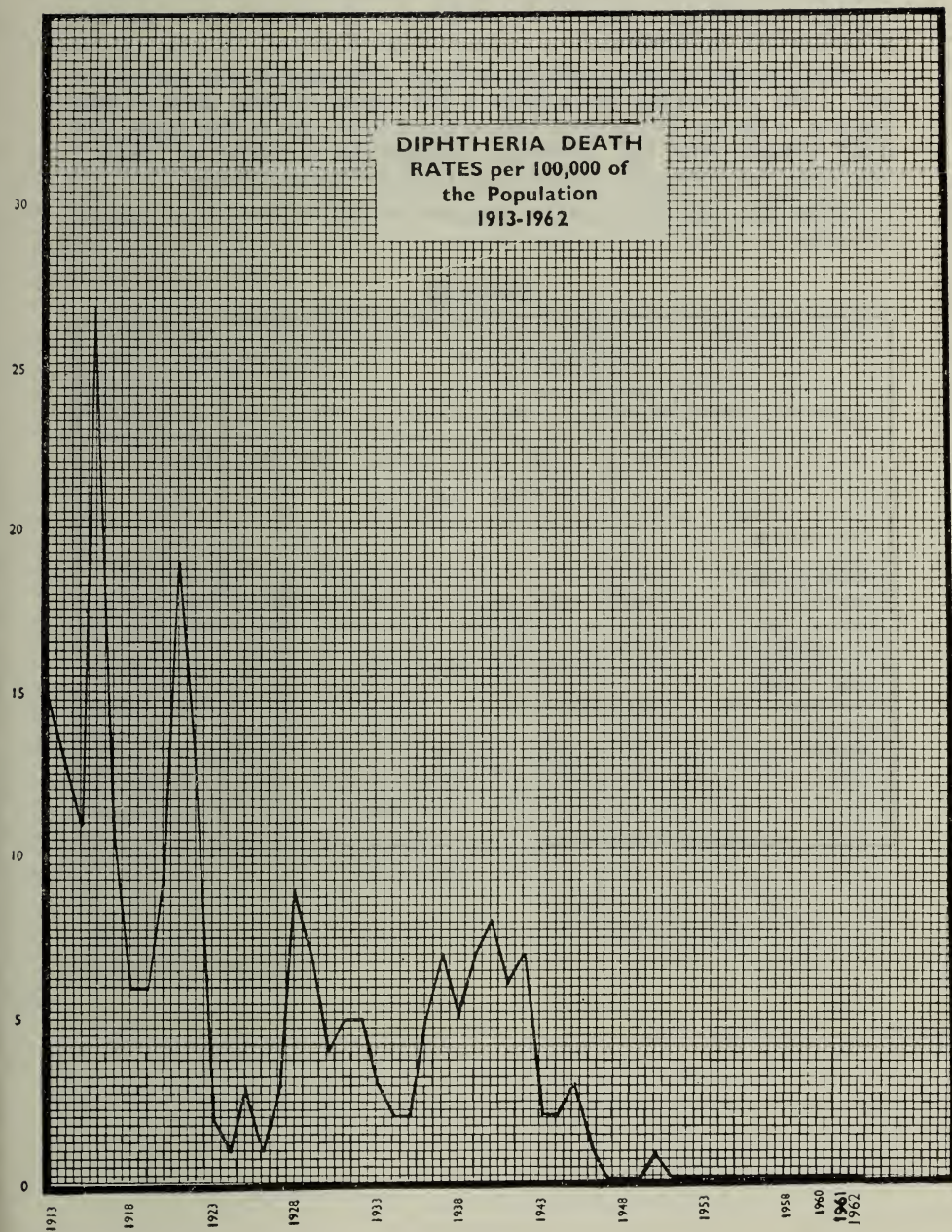
**Number and Percentage of Children Immunised against Diphtheria
as at 31st December, 1962**

	0-4 years	5-14 years	Total
Child Population ...	8,300	16,600	24,900
Children Immunised...	4,019	12,445	16,464
Percentage	48.42	74.97	66.12

Analysis of the Above Table

Year of Birth	1948- 1952	1953- 1957	1958	1959	1960	1961	1962	Total
Number of Children Immunised ...	6,981	5,464	977	967	1,049	834	192	16,464





POLIOMYELITIS

No cases of Poliomyelitis were notified to my department during 1962.

Arrangements for immunising children and young persons against Poliomyelitis continued.

Oral vaccine became available in March 1962, and by the end of the year 1,664 persons had been given a full course of three doses of this vaccine. A further 367 persons had received either one or two doses, and 3,277 persons who had previously commenced a course of "Salk" injections had been given a reinforcing dose of the oral vaccine.

Table 42 gives details of the progress of this service to the end of the year.

TABLE 42

Age Group	COURSES COMMENCED WITH "SALK" VACCINE						COURSES COMMENCED WITH ORAL VACCINE			Total No. of Persons Immu- nused
	Given 1 Inj.	Given 2 Injs.	Reinforcing Doses				Given 1 Dose	Given 2 Doses	Given 3 Doses	
			3rd		4th					
			Salk	Oral	Salk	Oral				
Children born in 1962	—	3	1	4	—	—	52	64	178	302
Children born in 1961	—	103	73	264	—	—	22	52	599	1,113
Children and Young Persons born 1943/60...	—	1,699	14,664	649	7,546	1,131	38	29	288	26,044
Young Persons born 1933/42...	—	1,185	8,212	345	—	—	22	25	191	9,980
Expectant mothers ...	—	127	689	24	—	—	—	—	21	861
Others	—	230	2,182	860	—	—	33	30	387	3,722
Totals ...	—	3,347	25,821	2,146	7,546	1,131	167	200	1,664	42,022

CHAPTER 8

AMBULANCE SERVICE

This service is administered under my general direction. The Chief Fire Officer also holds the appointment of County Ambulance Officer, and the General Control Room is common to both services.

These are extracts from the reports prepared by the Chief Ambulance Officer for the year 1st April, 1962, to 31st March, 1963.

Despite the fact that the demand on the service during the year was the highest on record—there was an increase in the number of patients conveyed over last year of 123, with a corresponding increase in the mileage incurred of 18,533—and despite the exceptionally hard winter, the service carried out its commitments exceptionally well and without hardship to patients.

I am pleased to be able to report that a welcome start has been made in transferring ambulances and personnel from the unsuitable accommodation obtaining generally to other more suitable stations. The new ambulance station, which forms part of the new Divisional Offices at Penygroes, has now been occupied, and it is hoped that before this report is circulated, the new ambulance station at Caernarvon will have been taken over. In both these cases, only good can come from these changes, and it is hoped that the building programme as approved will be completed without delay, so that all the county's ambulance stations will be up to the improved standard set, so far, at Penygroes and Caernarvon.

The Committee will recollect that under the ten-year Forward Planning of Health and Welfare scheme, it was envisaged that at least six additional full-time driver/attendants would require to be engaged during the first three years in view of the ever-increasing difficulty of recruiting and retaining part-time attendants. With the increase over the years in the number of stretcher case patients resulting from either road and other accidents or emergency medical removals to hospitals, it is becoming increasingly difficult to make the fullest possible use of the existing ambulance fleet as, with the shortage of part-time attendants, it is often necessary to withdraw one ambulance from its normal duty so that the driver may be used as an attendant on the emergency ambulance. This is reflected in the decrease in mileage and the lesser number of patients conveyed by ambulances this year as compared with last year, i.e. 1,387 fewer patients and 12,557 less mileage. Consequently, more sitting case patients must be conveyed in hired cars with a corresponding increase in the hired car mileage.

Patients Conveyed

Type of Case	Vehicles used		Total	Total 1961/62
	Ambu- lances	Hired Cars		
1. EMERGENCY WORK				
(a) Accidents	536	6	542	607
(b) Emergencies	3,170	218	3,388	3,071
(c) Maternities	626	4	630	633
Total	4,332	228	4,560	4,311
2. GENERAL WORK				
(d) Stretcher cases	2,931	—	2,931	2,706
(e) Sitting cases	25,388	11,552	36,940	37,307
Total	28,319	11,552	39,871	40,013
Total all cases	32,651	11,780	44,431	44,324
3. BY OTHER AUTHORITIES			136	139
4. BY RAIL			197	178
Grand Total			44,764	44,641

Inter-Hospital Transfer Work

Destination	Patients by Ambulances	Patients by Cars	Total Patients
(a) Hospitals within Caernarvonshire	4,354	206	4,560
(b) Hospitals out of Caernarvonshire	444	170	614
Total	4,798	376	5,174
In 1961/62 total patients was	4,519	276	4,795

Inter-Hospital Mileage

Destination	Ambulances	Cars	Total Miles
(a) Within Caernarvonshire	16,986	2,791	19,777
(b) Out of County	28,628	8,854	37,482
Total	45,614	11,645	57,259
In 1961/62 total mileage was	39,435	8,453	47,888

Patients Conveyed by Rail

Patients Conveyed as				Total Cases	Mileage saved on	Total Miles saved
(a) Stretcher cases	...	...	...	43	Ambulances	15,368
(b) Sitting cases	...	...	...	154	Ambulances or Cars	34,264
Total	...	...	...	197		49,632

CIVIL DEFENCE**Establishment**

The strength of the Ambulance and First Aid Section of the Civil Defence Corps at 31st March, 1963, was :—

Males : 23 Females : 16 Total : 39

CHAPTER 9

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

The services provided by the Council for the prevention of tuberculosis and for the care and after-care of tuberculous patients, are administered in close co-operation with those of the Regional Hospital Board for diagnosis and treatment and arrangements made many years ago for the examination of contacts to notified cases of tuberculosis have been continued.

Immediately notifications of tuberculosis are received in my department, the Health Visitors for the areas are asked to visit the homes and to submit full details of all contacts to me. These contacts are then invited to attend at special weekly clinics held by the Chest Physician in various parts of the county, and reports of the examinations are recorded in my department. Contacts who fail to attend for examination when invited are visited by the Health Visitors and persuaded to attend at later clinics.

Contacts who fail to attend after a second visit by Health Visitors are visited by Assistant Medical Officers in an endeavour to secure their attendance.

I am still disappointed at the response of some families to the offer of examination. We fail to attract all contacts, and the outlook of all those concerned with tuberculosis requires revision.

Table 48 on page 69 gives particulars of "contacts" who were examined at these clinics in 1962 with the results of the examinations.

There is full exchange of information concerning patients and their families between the Chest Physician and my department, and services provided by the County Council are frequently made available to patients on the recommendations of the Chest Physician. The Senior Rehabilitation Officer of the County Council maintained close liaison with the Chest Clinics.

Three open-air shelters were on loan to patients in various parts of the county during the year and were of considerable value in the semi-isolation of patients from the remainder of their families, and in relieving overcrowding in their homes. Patients were given advice and guidance so that they could derive the greatest benefit from their use.

The chronic nature of this disease often causes financial worry and depression. In addition to obtaining financial assistance for patients from Statutory and Voluntary Bodies, the Senior Rehabilitation Officer was able to assist some patients by introducing occupational therapy and assisting them to sell their products.

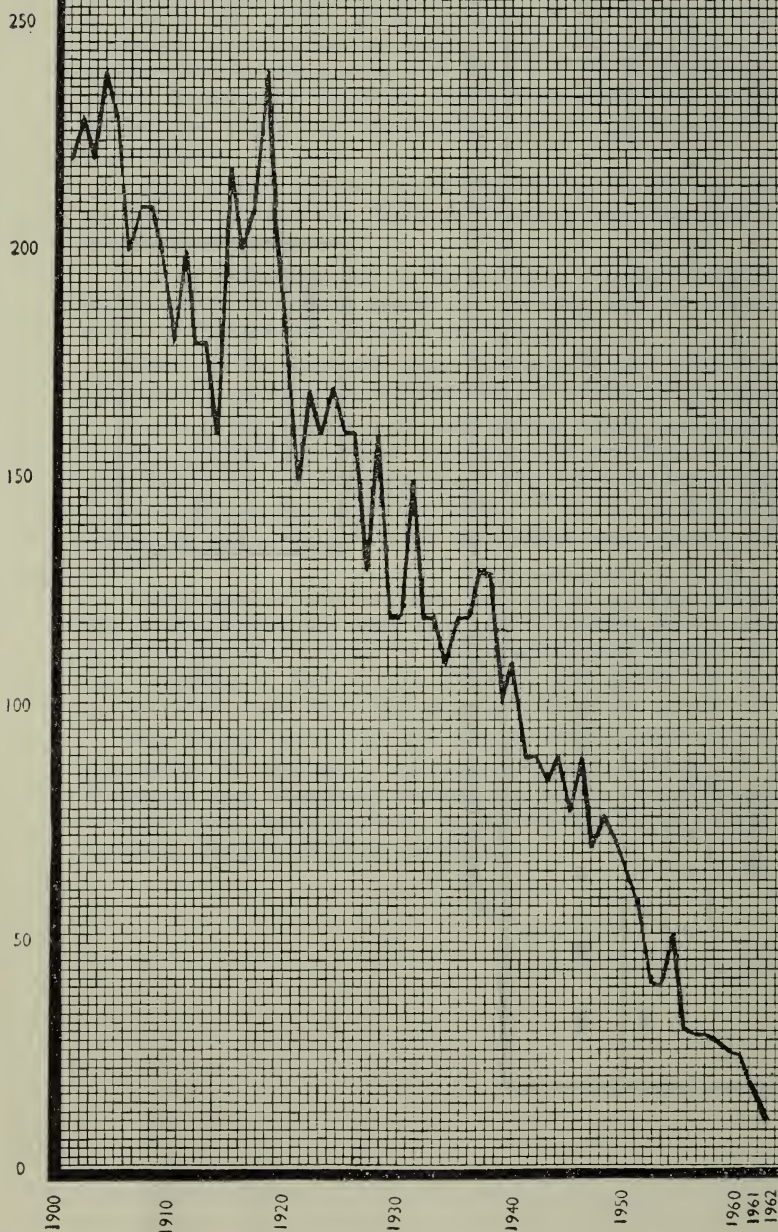
TABLE 48

Year	No. Referred		Result of X-Ray Examination														Failed to Attend *														
	Age Period						Pulmonary Tuberculosis						Negative						Age												
	—5		5—16		Adult		To- tal		Positive				[For Observation				—5		5—16		Adult		—5		5—16		Adult		To- tal		
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
1962	22	11	67	74	55	61	290																								38

* Out of those who failed to attend the Chest Clinic, these attended the Mass X-Ray Unit :—

Year	Adults		Children	
	M.	F.	M.	F.
1962	6	1	2	2

**TUBERCULOSIS DEATH
RATES per 100,000
Population 1901-1962**



B.C.G. Immunisation

Immunisation of children born to tuberculous mothers and of children in contact with open cases of tuberculosis continued, and details of children protected since the inception of the scheme are given in Table 51.

B.C.G. immunisation, extended to school leavers during 1955, was continued, and children attending the schools listed in Table 49 were tested and immunised as necessary.

The response to the invitations sent to parents was, with a few exceptions, very good.

A personal letter was sent to the parents of all children concerned. General practitioners and head teachers were informed of the programme. A preliminary skin test was performed on each child, and the result read five days later. On that day children who showed no reaction to the test were immunised with B.C.G. Those children who showed a reaction which indicated contact with the tubercle bacillus were examined by the Chest Physician. Their parents and other relatives were also invited to attend. The parents of each child are informed of all the results.

I anticipated that some parents would be apprehensive, and therefore I considered it essential to give all parents advance information to avoid unnecessary worry.

It will therefore be realised that the programme required and received very careful and meticulous attention by all concerned. The number of children tested was 1,746. Protective B.C.G. was given to 1,406 children in 1962.

It is vital, of course, to continue the other public health measures against the disease which have been described in previous reports. Details concerning B.C.G. protection will be found on pages 72-75.

An analysis of the results is given in Table 49.

B.C.G. Immunisation of School Children, 1962
TABLE 49

School	Consents Distributed	Consents received	Percentage consents	Number tested	Number absent	Number Positive	Percentage Positive	Number Negative	Percentage Negative	Number Immunised
Bangor Girls ...	133	125	93.97	119	6	4	3.36	111	93.27	111
Bangor Friars ...	123	122	99.18	110	12	3	2.73	103	93.64	103
Bangor Secondary Modern ...	275	224	81.45	199	25	43	21.61	156	78.39	146
Bethesda Bilateral ...	202	181	89.60	171	10	32	18.71	139	81.29	126
Bettws-y-Coed ...	16	16	100	15	1	—	—	14	93.33	14
Bodafon ...	45	43	95.55	42	1	8	19.05	34	80.95	34
Bodfeurig ...	12	12	100	10	2	—	—	8	80.00	7
Brynaerau ...	4	2	50	2	—	—	—	2	100	2
Brynengan ...	1	1	100	1	—	—	—	1	100	1
Caernarvon Boys ...	5	5	100	4	1	—	—	4	100	4
Caernarvon Girls ...	5	5	100	5	—	—	—	5	100	5
Caernarvon Grammar ...	18	18	100	18	—	—	—	18	100	18
Caernarvon Secondary Modern ...	108	84	77.00	67	17	5	7.46	62	92.54	62
Caernarvon V.C. ...	19	19	100	19	—	—	—	19	100	19
Capel Curig ...	5	5	100	4	1	—	—	4	100	4
Clynnog ...	12	12	100	12	—	1	7.69	11	76.92	11
Conway Vol. ...	37	37	100	35	2	2	5.71	28	80.00	28
Conway ...	286	268	93.71	241	27	77	31.95	151	62.25	151
Deunant ...	7	7	100	7	—	—	—	7	100	7
Dolgarrog ...	7	7	100	5	2	1	20.0	4	80.00	4
Four Crosses ...	11	11	100	11	—	—	—	11	100	11
Garnoldbennmaen ...	7	7	100	7	—	—	—	6	85.71	6
Gerlan ...	13	13	100	11	2	2	18.18	9	81.81	9
Glanadda ...	32	32	100	28	4	4	14.28	23	85.14	23
Glanwydden ...	40	32	80.00	28	4	5	17.86	23	82.14	23
Glanfryn ...	7	7	100	7	—	1	14.28	6	85.71	6
Golan ...	1	1	100	1	—	—	—	1	100	1
Great Orme, Llandudno ...	11	11	100	11	—	2	18.18	8	72.72	8
Llanabbae ...	11	9	81.81	9	—	—	—	9	100	9

continued

TABLE 49 (continued)

School	Consents Distributed	Consents received	Percentage consents	Number tested	Number absent	Number Positive	Percentage Positive	Number Negative	Percentage Negative	Number Immunised
Llandudno Secondary Modern...	246	221	98.83	202	19	34	16.83	168	83.17	168
Llandudno Welsh ...	13	13	100	10	3	3	30.00	6	60.00	6
Llanglynin ...	10	10	100	7	3	—	—	7	100	7
Llandwrog ...	5	5	100	4	1	—	—	4	100	4
Llanystumdwy ...	9	9	100	7	2	—	—	6	85.71	6
Llidiardau ...	11	11	100	11	—	—	—	11	100	11
Llithfaen... ..	5	5	100	4	1	1	25.00	3	75.00	3
Lloyd Street Junior ...	11	11	100	11	—	1	9.09	10	90.91	10
Maelgwn ...	51	51	100	48	3	9	18.75	27	56.25	27
Maenan ...	2	2	100	2	—	—	—	2	100	2
Nant B.H. ...	3	3	100	2	1	—	—	2	100	2
Nefyn ...	14	13	92.85	13	—	—	—	13	100	13
Pantglas ...	1	1	100	1	—	—	—	1	100	1
Penygroes Bilateral ...	104	104	100	93	11	19	20.43	74	79.57	74
Penmachno ...	6	6	100	6	—	—	—	6	100	6
Portnadoc ...	41	41	100	40	1	5	12.5	35	87.5	35
Pwllheli Grammar ...	15	15	100	10	5	1	10.0	9	90.00	9
Sarn Bach ...	13	10	76.93	10	1	—	—	9	90.00	9
St. George ...	13	13	100	10	3	—	—	10	100	10
St. Mary's ...	18	17	94.44	15	2	1	6.66	11	73.33	11
Talybont... ..	9	9	100	8	1	1	—	8	100	8
Trefor ...	12	12	100	6	6	1	16.66	5	83.33	5
Tregarth ...	8	8	100	8	—	1	12.5	7	87.5	7
Tremadoc ...	8	8	100	8	—	—	—	8	100	8
Tudweiliog ...	11	11	100	7	4	—	—	7	100	7
Ysbyty Ifan ...	4	4	100	4	—	—	—	4	100	4
TOTALS ...	2,096	1,929	92.03	1,746	184	266	15.23	1,440	82.47	1,406

TABLE 50

Year	Result of Examination																				Failed to Attend						
	Positive										Negative																
	No. Referred				Pulmonary				Non-Pulmonary				For Observation				Negative										
	Age				Age				Age				Age				Age				Age						
	--5	5-16			--5	5-16			--5	5-16			--5	5-16			--5	5-16			--5	5-16					
M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
1958	17	13	54	54	2	1	1	—	—	—	—	—	—	—	—	1	7	14	12	42	40	1	—	10	7*		
1959	15	17	68	45	1	2	2	1	—	—	—	—	—	—	—	4	3	14	10	57	38	—	1	6	3†		
1960	26	24	44	45	3	1	1	2	—	—	—	—	—	—	—	4	1	3	6	18	22	35	33	1	4	3‡	
1961	23	12	49	44	1	—	—	—	—	—	—	—	—	—	—	3	2	14	10	18	9	32	31	1	—	3	3ø
1962	22	11	67	74	—	—	—	—	—	—	—	—	—	—	—	1	—	14	25	21	11	49	47	—	2	2	

* 4 Males and 2 Females attended Mass Radiography Unit later.

† 2 Males and 2 Females attended Mass Radiography Unit later.

‡ 1 Male and 1 Female attended Mass Radiography Unit later.

ø 1 Male and 2 Females attended Mass Radiography Unit later.

**Details of other Pulmonary Abnormalities found during the Survey of
Caernarvonshire Schools in October-December, 1962**

TABLE 52

	Male	Female	Total
Bronchitis	1	—	1
Calcified Primary Complex... ..	8	7	15
Previously notified cases of Tuberculosis...	—	—	—
Old standing primary infection	3	2	5
Kept under observation	4	3	7
Found to have had B.C.G. previously ...	4	4	8
Total	20	16	36

Mass Radiography Survey of the General Population

The Mass Radiography Unit of the Welsh Regional Hospital Board conducted a survey of the general population in the county. Details of those examined in this survey and the results of the examination are given in Table 53.

Mass X-Ray of General Population, 1962

TABLE 53

Place	Number examined		Number found to be Abnormal		Number found to be Tuberculous		Number requiring further Observation		Number with other Abnormalities	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Aberconway Secondary School (scholars, teachers and staff)	275	262	3	3	—	—	1	1	2	2
Aluminium Corporation Ltd., Dolgarrog, Conway, Caernarvonshire ...	401	80	12	—	—	—	1	—	11	—
A.E.I. Hotpoint Ltd., Llandudno Junction, Caernarvonshire	721	183	18	2	—	—	3	1	15	1
Bangor Steam Laundry, Bangor, Caernarvonshire ...	9	37	—	2	—	—	—	1	—	1
Bernard Waidle (Everflex) Ltd., Caernarvon ...	232	25	14	3	—	—	6	1	8	2
Castle Firebrick Co., Caernarvon ...	44	—	2	—	—	—	1	—	1	—
Conway Hospital, Conway, Caernarvonshire (inmates, nursing and other staff)	37	55	4	3	—	—	—	—	4	3
Eryri Hospital, Caernarvon (patients and staff) ...	19	91	1	4	—	—	1	2	—	2
Ferodo Ltd., Griffiths' Crossing, Caernarvonshire ...	160	30	4	3	—	—	1	—	3	3
Gallt-y-Sil Hospital, Caernarvon (nursing and other staff) ...	4	35	—	2	—	—	—	—	—	2
Gwydyr Forester Training School, Bettws-y-Coed (students and staff)	50	—	—	—	—	—	—	—	—	—
Home Bakeries Ltd., Conway, Caernarvonshire ...	22	2	—	—	—	—	—	—	—	—
Llandudno General Hospital (medical, nursing and other staff)	11	39	1	1	—	—	—	1	1	—
McKenzie & Brown Ltd., Caernarvon... ..	52	5	—	—	—	—	—	—	—	—
Merseyside and North Wales Electricity Board, Caernarvon	31	3	1	—	—	—	—	—	1	—
Normal College, Bangor (students and staff) ...	93	221	—	—	—	—	—	—	—	—
Oakwood Park Hospital, Conway (patients and staff)	207	8	5	—	—	—	2	—	3	—
Polish Home, Penrhos, Pwllheli (residents and staff) ...	79	49	20	15	—	—	6	9	14	6
Taylor Woodrow Ltd., Griffiths Crossing, Caernarvon	86	1	5	5	—	—	3	3	2	2
St. David's Hospital, Bangor, Caernarvon ...	29	77	—	2	—	—	—	—	—	2
University College of North Wales (students and staff)	395	215	6	4	—	—	2	—	4	4
Total	2,957	1,418	96	49	—	—	27	19	69	30

TABLE 54

Number on Tuberculosis Register 31st December, 1962

	Age Periods			
	—5	5–15	Over 15	Total all ages
PULMONARY				
Males	7	42	553	602
Females	5	41	301	347
Total	12	83	854	949
NON-PULMONARY				
Males	—	13	66	79
Females	—	9	84	93
Total	—	22	150	172
Grand Totals ...	12	105	1,004	1,121

TABLE 55

Year	No. of Registered Deaths from Tuberculosis (All forms)	Death Rate per 100,000 of the Population
1944	113	89
1945	94	77
1946	108	88
1947	85	69
1948	95	76
1949	88	71
1950	79	64
1951	68	55
1952	49	40
1953	49	40
1954	63	51
1955	38	31
1956	35	28
1957	36	29
1958	34	28
1959	30	25
1960	30	25
1961	21	18
1962	11	9

Tuberculosis Mortality Rates
(Five-Yearly Periods)

TABLE 56

5-Year Period	Rate per 100,000 population			
	Caernarvonshire	Wales	England and Wales	Denmark
1926-1930	138	104	92	76
1931-1935	124	97	79	61
1936-1940	118	82	66	40
1941-1945	85	75	66	34
1946-1950	74	62	49	24
1951-1955	43	30	21	9
1956-1960	27	14	10	4
Rate for 1961	18	11	7	4
Rate for 1962	9	9	7	4

Summary of Formal Notifications of Tuberculosis received during 1962

TABLE 57

Age Periods	Number of Primary Notifications of New Cases														Total All Ages
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-		
Pulmonary															
Males... ..	1	—	1	2	—	—	1	4	4	9	15	4	4	45	
Females	—	—	—	—	5	2	3	3	2	—	1	—	1	17	
Non-Pulmonary :															
Males... ..	—	—	—	—	—	—	—	1	1	2	1	—	—	5	
Females	1	—	—	—	—	1	1	1	3	1	1	1	—	10	
Totals	2	—	1	2	5	3	5	9	10	12	18	5	5	77	

**New Cases of Tuberculosis coming to the Knowledge of the Medical
Officer of Health during 1962 otherwise than by Formal Notifications**

TABLE 58

Source of Information	Number of Cases in Age Groups														Total All Ages
	0-	1-	2-	5-	10-	15-	20-	25-	35-	45-	55-	65-	75-		
Death Returns from Local Registrars :															
Respiratory :															
Males	—	—	—	—	—	—	—	—	—	1	—	2	1	4	
Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Non-Respiratory :															
Males	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Death Returns from Registrar General (Transferable Deaths) :															
Respiratory :															
Males	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Non-Respiratory :															
Males	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Posthumous Notifications :															
Respiratory :															
Males	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Females	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Non-Respiratory :															
Males	—	—	—	—	—	—	—	—	—	—	—	1	—	1	
Females	1	—	—	—	—	—	—	—	—	—	—	—	—	1	

Distribution of Mortality

TABLE 59

	Age Period								Total
	Under 1	1—	5—	15—	25—	45—	65—	75 +	
Pulmonary :									
Males	—	—	—	—	—	5	4	—	9
Females	—	—	—	—	—	—	—	1	1
Non-pulmonary :									
Males	—	—	—	—	—	—	—	—	—
Females	—	—	—	—	—	1	—	—	1
Totals	—	—	—	—	—	6	4	1	11

CANCER

The death rate for Cancer in 1962 was 2.61, a decrease of 0.43 per 1,000 of the population as compared with 1961.

Particulars of the deaths in 1962 are given in these tables :—

TABLE 60

Urban					Rural				
Bangor ...	...	...	22	Nant Conway ...	...	...	16
Bethesda ...	...	...	11	Gwyrfai ...	...	...	55
Bettws-y-Coed ...	...	...	2	Lleyn ...	...	...	42
Caernarvon ...	...	...	23	Ogwen ...	...	...	13
Conway ...	...	...	33				
Criccieth...	...	...	6				
Llandudno ...	...	...	53				
Llanfairfechan ...	...	...	7				
Penmaenmawr ...	...	...	11				
Pwllheli ...	...	...	10				
Portmadoc ...	...	...	10				
Total ...	...	...	188	Total ...	...	...	126

GRAND TOTAL — 314

Age and Sex Distribution of Deaths

TABLE 61

Sex	All Ages	Under 1	1—	5—	15—	25—	45—	65—	75+
Males ...	167	—	—	—	1	7	57	62	40
Females ...	147	—	1	—	—	3	49	41	53
Total ...	314	—	1	—	1	10	106	103	93

Deaths from Cancer since 1940

TABLE 62

Year	Number of Deaths	Death Rate per 1,000 of the Population
1940	273	2.1
1941	276	1.9
1942	303	2.2
1943	281	2.1
1944	328	2.5
1945	306	2.51
1946	315	2.57
1947	285	2.32
1948	304	2.43
1949	348	2.82
1950	297	2.40
1951	317	2.57
1952	349	2.84
1953	312	2.54
1954	318	2.58
1955	340	2.76
1956	349	2.84
1957	349	2.86
1958	376	3.09
1959	311	2.57
1960	328	2.70
1961	363	3.04
1962	314	2.61

CANCER DEATH RATES
per 100,000 Population
1902—1962

300

200

100

0

1900

1910

1920

1930

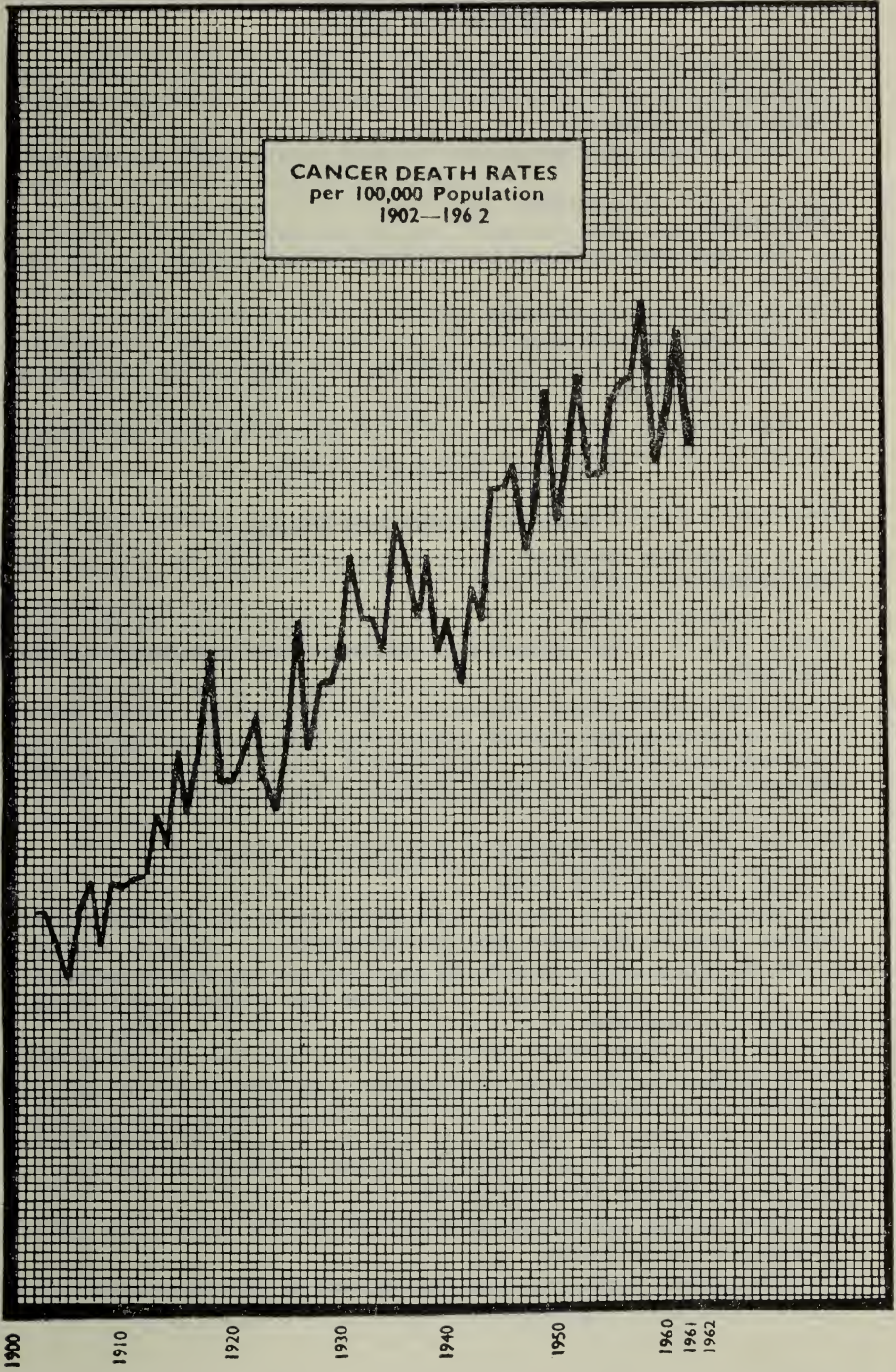
1940

1950

1960

1961

1962



CHIROPODY SERVICE

The Council's scheme commenced on 18th September, 1961, was continued, and up to the end of the year a total of 900 persons had registered for treatment.

During 1962, 2,020 old and new patients received 3,570 treatments.

Entitlement

The following groups are entitled to take advantage of the service :—

- (a) Persons of pensionable age.
- (b) Expectant mothers.
- (c) Physically handicapped persons who may not be included in (a) or (b).

The scheme at present only caters for persons in Group (a). Groups (b) and (c) will be included as soon as practicable.

Notes on the Chiropody Scheme

1. A medical certificate of recommendation must be obtained by the patient from his/her doctor.

2. A medical certificate will cover up to six treatments by the chiropodist over the twelve consecutive calendar months from the date of the certificate.

3. The patient should then contact the Chiropodist of his/her choice.

4. If a Chiropodist is of the opinion that a patient may require more than the specified number of treatments in a given period, the Chiropodist should write to the County Medical Officer of Health stating :—

- (a) the reason ;
- (b) the additional number of treatments recommended ;
- (c) the period they cover.

This matter would then be dealt with between the County Medical Officer, the patient's doctor, and the Chiropodist.

5. The Chiropodist's fee is 7s. 6d. per treatment, payable as follows :—

- (a) 2s. 6d. per treatment is paid by the patient direct to the Chiropodist ;
- (b) 5s. per treatment is paid by the County Council to the Chiropodist.

6. Medical Certificates and Chiropodist's completed records of patients' attendances for treatment relating to the accounts submitted for payment must be forwarded by Chiropodists with the accounts before the latter are approved for payment. Accounts should be submitted quarterly to the County Medical Officer of Health.

These medical certificates and records of patients' attendances will be retained by the authority.

(The patient's signature must be obtained on the attendance record by the Chiropodist for each attendance).

OTHER ILLNESSES

Patients suffering from illnesses other than tuberculosis can receive some of the service available to tuberculous patients. Consultants in the various hospitals in the county have been invited to let me have any relevant medical information about any patients who could be helped through the Welfare and Rehabilitation Service or any of the other services provided by the County Council.

The services rendered by the Senior Rehabilitation Officer, Health Visitors, District Nurses and Home Helps are often supplemented by the issue on loan of articles of nursing equipment for the temporary use of patients.

Convalescence is provided at suitable homes for persons who have been discharged from hospitals or have recovered from illness at home, and who require a further period of recuperation.

Financial responsibility was accepted for the maintenance of three persons at these homes during 1962.

REHABILITATION SERVICE

I have received this report on the services for which she is responsible from Mrs. E. J. Miller :—

“ During the year Manton Centre has been opened, and a report on this development follows :—

Manton Centre for Handicapped Persons, Caernarvon

Manton Factory was built thirteen years ago by a voluntary organisation, Manton Association Ltd., to provide sheltered employment for disabled persons, but had to close early in 1962. Caernarvonshire County Council, as part of its Rehabilitation Service, has purchased the building to accommodate a full-time Occupation Centre for physically handicapped persons who are not able to undertake normal employment.

One of the purposes of this Centre is to provide productive work with incentive payment on a piece-rate basis in a realistic workshop atmosphere so that people who have never worked or who have been unable to work for a long period can become accustomed to the rhythm and satisfaction of regular occupation and experience the value of team activity. For some, it will provide the degree of rehabilitation they need to prepare them to take a job in open industry.

Six different processes are now carried out in the Centre. Hitherto the members have had the choice of idleness or handicraft work at home. They are now undertaking services which are needed by local industry, and they derive, thereby, the satisfaction of feeling useful and productive members of society.

In an area of limited industrial development, the number of industries which can provide sub-contract work of any kind is restricted, and the Centre has been extremely fortunate in evoking the considerable goodwill of six firms whose contribution has been vital to the success of this new project. Ferodo Ltd., Caernarvon, have granted a sub-contract for finishing and packing stair-tread samples ; Corona Ltd., Caernarvon, send their wooden crates for repair and revarnishing ; Portmadoc Laundry

purchase metal coat-hangers from the Centre; M.A.N.W.E.B. supply electricity meters for dismantling, and the sale of scrap metals; Household Articles Ltd., Rhuddlan, pay the Centre to manufacture panscourers; Boots Chemists Ltd. have granted a seasonal sub-contract for pricing Christmas cards and making Christmas packs.

The Centre is open full-time, and an average of 25 members attend daily. Average working hours are from 10 a.m. to 4 p.m. Members come from all parts of central Caernarvonshire—from Bangor, Bethesda, Tregarth, Deiniolen, Dinorwic, Llanberis, Nant Peris, Groeslon, Penygroes, Talysarn. They arrive by public transport, by invalid motor tricycle, by electric tricycle, and by County Council transport—a 'bus hired to bring severely handicapped people from their homes who cannot travel by other forms of transport.

The County Council is grateful to the Ministries of Labour, of Pensions and National Insurance and to the National Assistance Board for their support and co-operation in facilitating arrangements to provide the maximum benefit of the members with whose welfare they are jointly concerned. Much is owed to individuals in many services who have given understanding and practical help in the planning and operation of the Centre. Widespread gratitude is felt that the County Council has undertaken this new service which has practical value for the community in general and great psychological and remedial value for those attending the Centre who needed it so much.

Other new developments to report are the employment of a part-time Home Teacher for the physically handicapped who provides occupational therapy tuition in the home of patients; the co-operation established with students of the University College of North Wales, Bangor, who are collaborating with the Red Cross in a Social Club for the handicapped and are drawing up a plan to visit the handicapped in their homes; the co-operation of the British Red Cross Society has been enlisted in developing social interests for the handicapped, and the Society has opened a highly successful Social Club for the disabled in Llandudno and a second Club in Bangor."

BLIND PERSONS

It has not been possible to obtain accurate information concerning all cases who have received treatment and, therefore, no figures are presented. Additional beds for the treatment of eye diseases are likely to be provided soon, which will lessen the waiting time for treatment.

The total number of persons on the Register at the end of 1962 was :—

Blind...	...	...	365
Partially Blind	...	...	100

No cases of ophthalmia neonatorum or retrolental fibroplasia were reported during the year.

Registered Blind and Partially Sighted Persons

TABLE 63

	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
No. of New Cases registered during the year :				
(a) No treatment recommended	7	1	—	19
(b) Treatment recommended (Medical, Surgical or Optical)	22	5	—	17

VENEREAL DISEASES

The close co-operation between the Consultant Venereologist and the Department was maintained during 1962 in order to ensure that all persons suffering from venereal diseases obtain treatment as early as possible, and that they continue treatment until they are completely cured. Enquiries were constantly made concerning persons who had been exposed to infection, and persuasive measures were adopted to secure their attendance at the Clinics for examination.

Special transport is provided in some instances, particularly for mothers with very young babies, to convey them to the clinics for treatment.

The clinic established at my request at the St. David's Hospital in 1949 was continued. All Wasserman positive mothers and children admitted to the hospital receive treatment from the Consultant, and are subsequently observed until cure can be declared.

Particulars of Caernarvonshire cases treated and the results of treatment during 1962 are given in these tables.

If all mothers who do not attend the pre-natal clinics received similar attention and treatment, congenital syphilis could be prevented and eliminated entirely.

TABLE 64

Number of Specimens	Microscopical		Cultural	Serum		Cerebro Spinal Fluid
	For Syphilis	Others		For Syphilis	Others	
1. Examined at and by the Medical Officer at the Treatment Centre	—	—	—	—	—	—
2. From patients attending at the Treatment Centres for examination to an approved laboratory	—	36	36	61	33	2

TABLE 65

Number of Cases	Syphilis		Gonorrhoea		Other		Totals		Grand Total
	M.	F.	M.	F.	M.	F.	M.	F.	
1. Under treatment or observation on 1st January	20	20	3	—	11	1	34	21	55
2. Removed from the Register in previous years who returned during the year for treatment or observation of the same condition ...	4	2	—	—	—	—	4	2	6
3. Transferred from other centres after diagnosis	1	—	—	—	—	—	1	—	1
4. Dealt with for the first time during the year under review (exclusive of cases under items 2 and 3) ...	1	4	9	2	34	12	44	18	62
Totals (items 1-4)	26	26	12	2	45	13	83	41	124
5. Patients completing treatment and/or observation	2	6	3	1	32	7	37	14	51
6. Patients transferred elsewhere ...	—	—	1	—	1	—	2	—	2
7. Patients not completing treatment and/or observation	—	1	1	—	1	—	2	1	3
8. Patients under treatment or observation on December 31st ...	24	19	7	1	11	6	42	26	68
Total (items 5-8)	26	26	12	2	45	13	83	41	124
9. Number of attendances for individual attention by Medical Officers and for intermediate treatment	176	150	23	10	86	47	285	207	492
10. Contacts attending for examination (referred by patients) ...	—	4	—	—	—	—	—	4	4

TABLE 66

Summary of Caernarvonshire Cases (with Results) Treated during 1940-1962

Year	NUMBER ATTENDED						NUMBER TREATED						LEFT OFF TREATMENT						TRANSFERRED TO OTHER CENTRES, ETC.						PRESUMED CURED						STILL UNDER TREATMENT						
	Syphilis			Gon.			Other			Syphilis			Gon.			Other			Syphilis			Gon.			Other			Syphilis			Gon.			Other			
	M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		M.	F.		
1940	16	15	20	9	—	—	16	15	20	9	—	1	—	2	—	—	—	—	—	—	—	5	13	9	—	—	—	10	10	5	—	—	—	—	—	—	
1941	20	17	9	4	13	11	20	17	9	4	13	11	5	3	1	—	—	—	—	—	—	—	1	6	—	13	11	15	11	2	3	—	—	—	—	—	
1942	25	17	16	9	20	12	25	17	16	9	20	12	2	3	4	1	20	12	5	—	—	—	—	—	—	2	13	15	17	4	2	6	—	—	—	—	
1943	40	25	21	6	13	15	40	25	21	6	13	15	2	4	4	—	—	—	—	—	—	3	—	9	2	13	15	26	21	8	4	—	—	—	—	—	
1944	52	38	21	14	9	28	52	38	21	14	9	28	19	12	3	2	—	—	—	—	—	3	1	11	3	7	28	20	24	4	8	2	—	—	—	—	
1945	25	38	22	14	19	36	25	38	22	14	19	36	3	11	—	3	—	—	—	—	—	2	1	5	4	12	20	20	24	14	10	7	16	—	—	—	
1946	50	45	40	19	30	19	50	45	40	19	30	19	4	6	17	5	—	—	—	—	—	6	4	15	6	26	15	32	30	8	8	4	4	—	—	—	
1947	87	92	42	21	20	22	87	92	42	21	20	22	15	4	15	7	3	—	12	4	1	—	—	—	—	—	7	12	22	57	84	13	7	5	—	—	
1948	111	108	32	10	61	4	111	108	32	10	61	4	10	31	3	6	4	2	22	13	1	—	—	16	1	20	3	44	—	63	61	8	1	12	2	—	
1949	97	109	29	6	65	35	97	109	29	6	65	35	9	6	2	1	—	8	1	2	—	—	9	13	15	2	56	29	67	86	10	3	9	6	—		
1950	93	119	28	6	79	40	93	119	28	6	79	40	5	23	3	—	—	3	7	6	—	2	1	16	9	8	3	58	33	66	80	11	3	19	6	—	
1951	94	111	19	4	58	29	94	111	19	4	58	29	15	22	2	—	—	7	3	2	—	—	—	14	8	10	4	36	23	58	78	5	—	22	6	—	
1952	71	110	17	5	60	23	71	110	17	5	60	23	6	8	2	2	—	—	11	1	—	1	1	9	13	5	—	45	14	46	69	9	3	14	8	—	
1953	64	96	18	6	52	36	64	96	18	6	52	36	6	13	5	2	—	2	1	1	—	—	7	15	7	3	42	21	45	66	5	1	10	15	—		
1954	58	97	10	6	42	27	58	97	10	6	42	27	7	11	3	3	—	3	7	1	—	2	—	3	2	3	—	32	16	44	74	3	2	8	11	—	
1955	49	109	8	5	49	28	49	109	8	5	49	28	8	16	3	1	1	2	1	2	1	—	2	1	5	9	3	3	34	11	35	82	1	1	12	14	—
1956	45	94	4	1	42	29	45	94	4	1	42	29	3	14	1	—	2	—	3	—	—	—	1	8	3	1	32	10	34	69	—	—	10	17	—		
1957	44	82	11	3	42	34	44	82	11	3	42	34	6	6	—	—	1	—	1	1	—	—	3	10	4	1	25	16	34	65	6	2	15	18	—		
1958	41	73	8	5	48	22	41	73	8	5	48	22	4	13	1	—	1	—	2	—	—	—	11	12	7	3	38	18	26	46	—	2	9	4	—		
1959	30	52	3	2	42	6	30	52	3	2	42	6	4	16	2	—	1	—	1	—	—	—	7	9	—	2	31	4	18	27	1	—	9	2	—		
1960	27	37	8	3	39	19	27	37	8	3	39	19	2	4	3	—	—	—	—	1	—	—	3	3	3	2	26	12	20	31	4	1	12	7	1		
1961	26	36	13	2	46	15	26	36	13	2	46	15	5	10	3	—	1	—	—	1	—	—	1	5	7	2	33	14	20	20	3	—	11	1	—		
1962	26	26	12	2	45	13	26	26	12	2	45	13	—	1	1	—	1	—	—	—	—	—	2	6	3	1	32	7	24	19	7	1	11	6	—		

BACTERIOLOGICAL AND PATHOLOGICAL SPECIMENS

Table 67 gives details of the bacteriological and pathological specimens sent by the Department for examination to the Public Health Laboratory at Conway.

TABLE 67

	1962
Fæces (for the presence of food poisoning organisms)	1,968
Nose and throat swabs (for the presence of hæmolytic streptococci)	94
Nose and throat swabs (for diphtheria bacilli)... ..	---
Food and containers (for the presence of food poisoning organisms)	6

HEALTH EDUCATION

The Health Visitors, District Nurses and other members of our staffs are in the privileged position of visiting people in their own homes, where they can discuss health matters in confidence and privacy.

To supplement Health Education in the home, talks are also given at clinics, where film strips, films and other visual aids are used, followed by group discussions.

Staff give talks by invitation to many organisations in the county. An epidiascope and film strips are available to illustrate the talks. Leaflets and posters are obtained from various sources.

Staffs are charged to promote the mental as well as the physical health of the child. Indeed, education for Mental Health must begin before the child is born, and an effort made to ensure that the expectant mother and father adopt healthy attitudes to problems of the upbringing of their family.

The increasing number of home accidents is causing concern throughout the country. The Royal Society for the Prevention of Accidents have intensified their campaigns to combat these tragedies. They supply excellent poster material which is displayed at clinics, supported by our own display material and talks by Health Visitors.

The County Health Officer gave fifteen lectures to members of the public and to students at the Hotel and Catering School.

MEDICAL EXAMINATION OF STAFF

In addition to their normal duties, Assistant Medical Officers have to medically examine applicants for admission to training colleges as teachers and employees entering the services of the County Council for superannuation purposes.

Details of these examinations during 1961 are given below :—

TABLE 68

	1962
Examinations of staff for entering into Council's Superannuation Scheme	149
Examinations for admission to Training Colleges as intending teachers	247

CHAPTER 10

HOME HELP SERVICE

The Home Help Service continues to be a much appreciated service. Applications for the service are made direct by the patient's relatives or general practitioner, district nurse or any other person.

The demand for assistance through this service is increasing steadily, consequently it is necessary to increase the number of home helps. Difficulty is experienced in some parts of the county in finding suitable persons to undertake this work but, on the whole, the standard of those working in this service is good.

It is not likely that the present resources will be adequate to meet the need in a few months' time. With the growth of this service, more and more pressure is made on the administrative and clerical staff.

There were at the end of the year 24 full-time home helps and 42 part-time home helps working throughout the county.

An analysis of the work performed is given in this table :—

TABLE 69

Type of Case	No. of Cases on Register at the beginning of the year	No. of New Cases during the year	No. of Cases on Register at the end of the year
Maternity	1	29	2
Tuberculosis	2	2	2
Blind	3	6	7
General	139	187	187
Totals	145	224	198

CHAPTER 11

MENTAL HEALTH SERVICES

I have received this report from the Chief Mental Health Officer on the services provided under the Mental Health Act during 1962 :—

Mental Sub-Normality

A start was made during the year on the provision of much-needed training for sub-normal children. Two part-time training centres were opened in temporary premises—one at Deiniolen and one at Llandudno Junction. Although these are small beginnings (the number on the registers at 31st December, 1962, was only twenty), those parents whose children are attending are very appreciative of the results. Within a very few months we received several reports from parents of improvement in children's behaviour at home and of a definite increase in social attainments. Progress in the intellectual field is bound to be slower and limited, but even here encouraging results have been achieved. Already the establishment of these centres is having an effect on parental attitudes to sub-normality. Parents find it easier to accept their child's exclusion under Section 57 of the Mental Health Act if they know that help can be given and is available to them.

The premises at Deiniolen are such that it has been possible to provide training for adult females as well as school age children. This includes cookery and dressmaking. It is not possible to provide any similar instruction for adult males, and this remains an urgent need in the centre part of the county. At Llandudno Junction we have the use of only one room, and as a result only school age children can be accommodated at the centre. Through the kindness of Dr. Craft, the Regional Psychiatrist of the Sub-Normal, arrangements have been made for adult males in the northern part of the county to attend Oakwood Park Hospital daily and to receive training in the hospital workshops. No training is yet available for adult females. No training facilities exist in the Lley Peninsula, and this must be one of the first aims for 1963.

A site has now been acquired in Caernarvon for the erection of a purpose-built training centre. Work on this project will start in 1963. Miss E. F. Bell was appointed as a home teacher, and is attending the teachers' training course organised by the National Association for Mental Health. She will return to duty with the authority in July 1963.

There has been an increase of over 20 per cent in the number of sub-normal adults needing supervision. Other social agencies are realizing that a Mental Health Section exists, and are turning to it for help. Also there is an increase in the need for social work for patients discharged from hospitals for the sub-normal. Unfortunately it must be admitted that owing to staff shortage, these needs are not being met. Some of this work is being done by the staff of Oakwood Park Hospital, but a great deal is being left undone.

Dr. Craft, Consultant Psychiatrist, continued to hold out-patients' clinics in various centres in the county and advised on many problems relating to sub-normality. During 1962 twelve such clinics were held, and thirty-one patients were interviewed with their relatives.

Unlike most local health authorities we have a very small waiting list of patients needing hospital care. Some difficulty has been experienced in obtaining temporary care to give parents and relatives a holiday. This has been largely due to shortage of nursing staffs in the hospitals.

Mental Illness

There was a slight decrease in the number of emergency admissions to Denbigh Hospital arranged by the authority's Mental Health staff. The figures are too small for any conclusions to be drawn from them, but it may be a part of a general trend for admissions to be arranged informally through out-patient clinics. Details of the emergency admissions are as follows :—

Admitted to hospital under Section 29	...	82
Admitted to hospital under Section 25	...	—
Admitted to hospital under Section 26	...	—
Admitted to hospital under Section 60	...	1
Admitted to hospital informally	...	6
Total...	...	89

An appreciable portion of the after-care visiting of discharged patients is being taken over by the authority's own officers. Whereas in 1961 the hospital Social Worker staff paid 395 visits to Caernarvonshire patients, in 1962 this number dropped to 177. During 1961 the local authority had no after-care or preventive service, but by the end of 1962 sixty-three patients were being visited in their homes and were being given support and guidance. The Mental Welfare Officers continued to have ready access to the Consultants' clinics at Bangor to obtain advice on the more difficult problems met with.

There is a standing invitation for officers to attend weekly case conferences at Denbigh Hospital. This is a valuable invitation and one which officers accept whenever possible. It is unfortunate that so much time has to be spent in travelling to these meetings, and officers sometimes feel that this time is sorely needed by patients in their care. Attendances have not therefore been very regular. When the department is fully staffed, it will perhaps be possible to hold such meetings in Bangor while the Consultant Psychiatrists are visiting the county for their out-patients' clinics.

Staff

Reference was made in last year's report to the direct relationship between a good mental health service and the number and quality of the staff employed, and mention was made of the difficulty of obtaining

qualified Mental Welfare Officers. The position is no easier now, and will not be for many years to come. During 1962 one other Officer was appointed and some expansion of the service was possible. As always happens when a new service is created, demands upon the service have increased. A large portion of the Chief Mental Welfare Officer's time is spent on administration, and the two Mental Welfare Officers are impossibly overloaded with work. As long as this situation remains, it cannot be said that an adequate service is being provided. It seems inevitable that the local authority will have to face the financial task of attracting qualified officers from other areas and of seconding future officers to training courses.

MENTAL HEALTH STATISTICS FOR 1962
TABLE 70

1. Admissions to Guardianship of L.H.A. or other Guardian during the year ended 31/12/62.	Mentally Ill			Psychopathic			Subnormal			Severely Subnormal			Totals			Grand Total					
	Under Age 16		16 and Over	Under Age 16		16 and Over	Under Age 16		16 and Over	Under Age 16		16 and Over	Under Age 16		16 and Over						
	M.	F.	M.	M.	F.	M.	M.	F.	M.	M.	F.	M.	M.	F.	M.		F.				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)		(16)	(17)	(18)	(19)	(20)	(21)
(a) Under Section 33 ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Section 41(2)(b) from hospitals ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Section 41(2)(b) from mental nursing homes ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Section 87 ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(b) On court orders ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Section 60 or 61 ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(c) By direction of Home Secretary, Section 79 ... L.H.A. Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
2. Total number under guardianship at 31/12/62	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
L.H.A.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
3. Number of patients under L.H.A. care at 31/12/61 :	2	—	32	40	—	1	—	—	11	6	56	37	24	17	50	54	37	24	138	131	330
(a) Total number ...	—	—	3	2	—	—	—	—	1	—	3	1	12	4	1	6	13	4	7	9	33
(b) Attending day training centre ...	—	—	—	—	—	—	—	—	10	5	18	9	6	3	24	19	16	8	42	28	94
(c) Awaiting entry thereto ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(c) Resident in a residential training centre ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Awaiting residence therein ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Receiving home training ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(d) Receiving home training ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Resident in L.A. home/hostel ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Awaiting residence in L.A. home/hostel ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Resident at L.A. expense in other residential homes/hostels ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(e) Resident at L.A. expense by boarding out in private house-hold ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
(f) Receiving home visits and not included under (b) to (e) ...	2	—	29	38	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—											

Premises Provided at 31st December, 1962

TABLE 73

Age Group provided for	Mental Category provided for	Day Training Centres including Special Care Units		Residential Training Centres		Social Clubs or Centres		Homes or Hostels	
		Number of Centres (1)	Number of Places (2)	Number of Centres (3)	Number of Places (4)	Number of Clubs or Centres (5)	Number of Places (6)	Number of Homes or Hostels (7)	Number of Places (8)
1. Under 16	(a) Mentally ill ...	—	—	—	—	—	—	—	—
	(b) Mentally subnormal ...	1	10 (part-time only)	—	—	—	—	—	—
2. 16 and over	(a) Mentally ill ...	A few	patients attend	Rehabilitation	Centre for	Physically H	andicapped	—	—
	(b) Mentally subnormal ...	—	—	—	—	—	—	—	—
3. Juniors and Adults	(a) Mentally ill ...	—	—	—	—	—	—	—	—
	(b) Mentally subnormal ...	1	24 (part-time only)	—	—	—	—	—	—
4.	Total ...	2	34	—	—	—	—	—	—

5. Special Units included in 1-4 above providing for the severely subnormal with gross physical handicaps or gross behaviour difficulties	Units functioning as Group within Day Training Centres	Self-contained Units independent of Day Training Centres		(a) Number of Units	(b) Number of Places
		(a) Number of Units	(b) Number of Places		
—	—	—	—	—	—

6. Premises opened or closed since 31st December, 1961 :

(a) Opened : 1. Health Department Clinic, Deiniol Road, Deiniolen. Training Centre for Juniors and Adults. (24) Part-time from 4/6/62

(b) Closed : — 2. Part of—Blodwel Children's Home, Broad Street, Llandudno Junction. Junior Centre. (10) Part-time from 28/5/62

Number of Local Health Authority Staff in Certain Categories at 31st December, 1962
TABLE 74

	Grade	Qualifications	In post at 31/12/62			Vacancies on establishment at 31/12/62		
			Number of whole-time officers	Part-time Officers Number	Whole-time equivalent	Number of whole-time officers	Part-time Officers Number	Whole-time equivalent
A. Training Centres	(1) Organisers ...	(a)	—	—	—	—	—	—
	(2) Supervisors ...	(b)	—	—	—	—	—	—
	(3) Assistants (excluding domestic staff) ...	(a)	—	2	1	—	—	—
	(4) Home teachers ...	(b)	—	2	1	—	—	—
B. Homes/Hostels	(1) Wardens ...	(a)	—	—	—	—	—	—
	(2) Others (excluding domestic staff) ...	(b)	1 Undergoing Training	—	—	—	—	—
C. Mental Health Social Workers	(1) Senior posts, including officers having supervisory or other special responsibilities ...	(a)	—	—	—	—	—	—
	(2) Social workers, excluding officers included in (1) above ...	(b)	2	—	—	—	—	—
	(3) ...	(c)	—	—	—	—	—	—
	(4) ...	(d)	—	—	—	—	—	—
	(5) ...	(a)	—	—	—	—	—	—
	(6) ...	(b)	—	—	—	—	—	—
		(c)	1	5	1½	1	—	—
		(d)	—	—	—	—	—	—

Return of Mental Nursing Homes Registered at 31st December, 1962

TABLE 75

Name of mental nursing home	Total number of beds	Number of beds available for						Whether authorised to detain patients
		Patients aged under 16			Patients aged 16 and over			
		Mentally ill	Psycho-path	Subnormal or severely subnormal	Mentally ill	Psycho-path	Subnormal or severely subnormal	
	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Bryn-y-Neuadd, Llanfairfechan	100	—	—	—	100	—	—	Yes
Total	100	—	—	—	100	—	—	

Return of Mental Nursing Homes Authorised to Detain Patients

TABLE 76

PERIOD I

PART I

Number of admissions during 1962										
Type of Admission (1)	Mentally ill		Psychopath		Subnormal		Severely Subnormal		Total	
	M. (2)	F. (3)	M. (4)	F. (5)	M. (6)	F. (7)	M. (8)	F. (9)	M. (10)	F. (11)
(a) Informal admissions	63	59	—	—	—	—	—	—	63	59
(b) Compulsory admissions for observation under Section 25	—	—	—	—	—	—	—	—	—	—
(c) Compulsory admissions for observation under Section 29	—	—	—	—	—	—	—	—	—	—
(d) Compulsory admissions for treatment under Section 26	18	10	—	—	—	—	—	—	18	10
(e) Transfers from guardianship under Section 41(2)d	—	—	—	—	—	—	—	—	—	—
(f) Removals from Northern Ireland under Section 87	—	—	—	—	—	—	—	—	—	—
(g) Compulsory admissions on court orders under Section 60	—	—	—	—	—	—	—	—	—	—
(h) Compulsory admissions on court orders under Section 61	—	—	—	—	—	—	—	—	—	—
(j) Compulsory admissions on court orders under Section 65	—	—	—	—	—	—	—	—	—	—
(k) By direction of Home Secretary under Section 73	—	—	—	—	—	—	—	—	—	—
(l) Removals from Northern Ireland, Channel Islands or Isle of Man under Section 88	—	—	—	—	—	—	—	—	—	—
(m) Removals from Northern Ireland, Channel Islands or Isle of Man under Section 89	—	—	—	—	—	—	—	—	—	—
(n) Admissions under Section 64(1)	—	—	—	—	—	—	—	—	—	—
(o) Admissions under Section 68	—	—	—	—	—	—	—	—	—	—
(p) Admissions under Section 71(1)	—	—	—	—	—	—	—	—	—	—
(q) Admissions under Section 135	—	—	—	—	—	—	—	—	—	—
(r) Admissions under Section 136	—	—	—	—	—	—	—	—	—	—
(s) Total Admissions	81	69	—	—	—	—	—	—	81	69

Number of cases who completed a period of observation under sections 25 or 29 or the Act

Number of cases of use of compulsory powers : (a) and (b)—following informal admission
(c) and (d)—prior to informal residence

Number of cases of use of compulsory powers : (a) and (b)—following informal admission
(c) and (d)—prior to informal residence

Number of patients resident in mental nursing homes (including any temporarily absent and expected to return) on 31st December, 1962											
Category of patient	Mentally ill		Psychopath		Subnormal		Severely Subnormal		Total		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	
(a) Patients subject to detention under the Act but excluding any detained under section 30(2)	—	2	—	—	—	—	—	—	—	2	
(b) Mentally disordered patients not subject to detention but including any temporarily detained under section 30(2) ...	—	6	—	—	—	—	—	—	—	6	
(c) Other patients									—	—	

CHAPTER 12

MILK SUPPLIES

I have received this report from the County Health Officer :—
“ To the County Medical Officer of Health.

DEAR SIR,

Supervision and Licensing of Pasteurising Establishments

Milk contains fats, proteins, sugar, minerals, water and vitamins, and is considered the ideal food. Milk is also a commodity that can easily be infected, either by a diseased animal or infection transferred from a milk handler who may be ill or a carrier of infection.

Instances of infection in animals which can cause illness in the consumer is cattle abortion, known as brucella abortus ; intestinal infection in cattle, which is caused by Salmonella organisms ; or the common infection of the udder, which is known as Mastitis. The illness in humans caused by these cattle diseases are known as Undulant Fever, Enteritis and Food Poisoning. However, to safeguard our milk supplies, we pasteurise the milk. Pasteurisation benefits us twofold as primarily it will make infected milk safe for consumption, and secondly it gives a longer life to the milk without materially changing the nutritional value of the commodity.

In this county, pasteurised milk may be purchased in all districts except for some rural areas, and all our schools are provided with pasteurised milk for consumption by the children.

There are six licensed pasteurising plants in the county, three of which utilise the High Temperature Short Time methods of pasteurising milk and the other three use the Holder method. The milk, when submitted to the High Temperature Short Time Method of pasteurisation, is heated to a temperature of 161° F. and held at this temperature for 15 seconds, and then immediately cooled to 50° F. or less. In the Holder Method the milk is heated to a temperature of 145° F.—150° F. and held at this temperature for a period of 30 minutes and immediately cooled to a temperature of 50° F. or less.

Pasteurised milk is submitted to the Phosphatase Test, which indicates whether the milk has been held at the above temperatures. The milk is also submitted to the Methylene Blue Test, which gives an indication of the keeping quality of the milk.

During the year 762 samples of pasteurised milks have been taken and submitted for examination to the Public Health Laboratory, Conway. We have experienced very little trouble with pasteurised milk, as only six failed the Phosphatase Test and eleven failed the Methylene Blue Test.

One hundred and forty-three inspections were made of the pasteurising establishments during the year. Works of improvements have been made at several of the dairies with regard to plant and premises.

Water samples, bottle washings and churn washings were taken. All were returned as satisfactory.

Analysis of Bacteriological Milk Supply

TABLE 79

Designation of Milk	No. of Samples taken	Methylene Blue Test						Phosphate Test						Turbidity Test	
	P.P.	S.	M.D.	P.P.	S.	M.D.	Negative	P.P.	S.	M.D.	Positive	P.P.	S.	M.D.	Neg. Pos.
Tuberculin Tested (Raw)	23	—	182	22	—	141	—	—	—	—	—	—	—	—	—
Tuberculin Tested (Past.)	135	1	224	128	1	220	1	130	1	224	—	5	—	—	—
Pasteurised	89	147	166	86	147	159	147	88	147	165	—	1	—	—	—
Sterilised	2	—	14	—	—	—	—	—	—	—	—	—	—	16	—
Totals	249	148	586	236	148	520	148	218	148	389	—	6	—	1	16

P.P. = Pasteurising Plants. S. = Schools. M.D. = Milk Dealers.

The Milk (Special Designation) Regulations

Since the implementation of the Milk (Special Designation) Regulations 1960, 240 licences have been issued for the sale of pre-packed milk bearing the designation "Tuberculin Tested", "Pasteurised", "Tuberculin Tested Pasteurised" or "Sterilised".

In the course of the year a total of 983 samples have been taken. You will note from the above table that keeping quality failures from the various designated milks were as follows :—

Designation	No. of Failures	Percentage with regard to number of samples taken
Tuberculin Tested	42	18.5%
Tuberculin Tested (Pasteurised) ...	11	3.05%
Pasteurised	10	2.48%
Sterilised	—	—

Again we note that pasteurised milks are superior in keeping quality to unpasteurised milks. The main reason for the high percentage of failures in raw milk is due to the delay experienced in the milk when sold by milk dealers in becoming available to the consumer. The small producer/retailer is able to bottle and distribute his milk without undue delay, but this is not possible when it is sold to a dealer who might be retailing the milk in an area sixty miles distance from where it was produced.

I am of the opinion that the Minister may very well look into this aspect of milk distribution due to the high percentage of failures of raw milk sold pre-packed by milk dealers.

What is the answer to this problem? Should the Food and Drugs Authority take action to rescind licences, which would involve the cumbersome legislation governing this procedure in the Regulations; or should all milk made available to the public be pasteurised?

In view of the keeping quality record of pasteurised milks and the known fact that pasteurisation will destroy any pathogenic bacteria present in the milk, all milk sold to the public should be pasteurised.

The storage of milk by milk roundsmen is satisfactory, as all have by now provided adequate cold storage, but with regard to the sale of pre-packed milk from shops, this is not so.

The legislation dealing with the storage of milk is very ambiguous and considered unsatisfactory in several ways. In some premises the practice of storing milk on the forecourt of shops is unsatisfactory, but due to the wording of the regulation it is difficult to institute proceedings against a person storing milk in this manner.

Herd Sampling for the Presence of Tubercle Bacilli

TABLE 80

Grade of Milk	No. of Samples Taken	No. of Samples Positive	No. of Samples Negative
Tuberculin Tested ...	432	—	432
Undesignated ...	1	—	1
Totals ...	433	—	433

Herd Sampling for the Presence of Brucella Abortus

During the year 558 milk samples have been taken in the detection and investigation of *Brucella abortus* organisms in milk.

Ten bulk milk samples were found positive, and following investigation of infected herds, twelve cows were found infected.

This infection of cattle, which is transmissible to humans is proving difficult to trace and eradicate in herds, due to :—

- (a) The majority of cows found infected are intermittent excretors of the disease.
- (b) Producers who rely on the purchase of cows in milk are extremely liable to purchase a cow which is infected, as the present legislation does not compel the slaughter of infected cattle.

However, in recent years more attention is being given to this infection by the Ministry of Agriculture, Fisheries and Foods, and from other sources. The Ministry of Agriculture now offer free of charge calfhood vaccination with vaccine S.19. The Oxford Working Group state that there is no effective legislation, and suggest that attention be given to :—

- (a) The desirability of notification of animal cases by veterinary surgeons to the County Health Departments :
- (b) The introduction of compensation for removal and slaughter :
- (c) The disinfection and fencing of infected farms :
- (d) Measures for identification of infected animals and the dangers of buying in animals whose histories are unknown :
- (e) The definition of sale regulations with regard to infected animals.
- (f) The confinement of vaccination to calfhood S.19 vaccination policy having been indiscriminate in the past ; this would give the requisite immunity and enable infected adult animals to be identified. Vaccination should be compulsory.

I would indeed welcome that this county be considered as a pilot eradication area in any new Ministry Scheme.

Sampling for Brucella Abortus

TABLE 81

Grade of Milk	Number of Initial Samples Taken	Number of Subsequent Samples Taken	Total Number Taken	Number of Bulk Milk Samples Positive	Number of Individual Cow Milk Samples Positive
Tuberculin Tested ...	432	125	558	10	12
Undesignated ...	1	—	—	—	—
Totals ...	433	125	558	10	12

In the investigation of infected herds, 98 Ring Tests were made.

TABLE 82

Comparison of Milk Sampling for Brucella Abortus, 1954-1962

Year	Initial Samples Taken	Subsequent Samples Taken	Total	Negative Samples	No. of Bulk Samples Positive	No. of Individual Cow Samples Positive	Percentage of Infected Samples
1954	280	104	384	374	9	1	3.21
1955	172	15	187	185	2	—	1.16
1956	292	45	337	326	6	5	2.05
1957	433	140	573	537	15	21	3.5
1958	281	117	398	373	12	13	4.27
1959	382	146	528	507	9	12	2.40
1960	284	182	464	454	14	16	4.92
1961	343	213	556	512	11	33	3.20
1962	433	125	558	536	10	12	2.80

Mastitis

Nine cases of suspected mastitis were referred to the department by the Weights and Measures Department. Milk samples submitted for bacteriological examination failed to show any pathogenic organisms.

Salmonella Infection

Five cases of Salmonella were notified by the Animal Health Division of the Ministry of Agriculture, Fisheries and Foods. Eight milk samples and faecal samples from contacts were taken. No milk samples or human contacts were found to be positive.

Food Premises

Fifty-nine food premises were inspected in 1962. Any contravention of the Food Hygiene Regulations 1960 were referred to the Public Health Inspector of the area concerned.

Miscellaneous

During 1962, 210 miscellaneous visits were made in conjunction with public health matters.

ANEURIN JONES, County Health Officer."

CHAPTER 13

FOOD AND DRUGS ACT 1955

These are extracts from the report of the Chief Sampling Officer :—

“ During the year ended 31st March, 1963, a total of 521 samples of milk, other foods and drugs, were dealt with by the department under the provisions of the Food and Drugs Act 1955.

The large majority of the samples were of milks, 365 in all, the remainder consisting of 143 foods and 13 drugs. The department tested 258 milks, and the other 107 were sent to the Public Analyst.

Quite a large proportion of milks were reported not genuine in various respects. The details are given under Table B, and in general indicate a deterioration when compared with the results of last year.

A number of camping sites were visited at official and unofficial times, and it was found that quite a volume of “ off-record ” sales of milk often under unhygienic conditions were being carried on. Prosecutions were successfully instituted in connection with the quality of the milk sold at some of these camping sites.

Particulars of samples of milk, food and drugs obtained under the Food and Drugs Act 1955, for the year ended 31st March, 1963.

TABLE B

	Genuine	Not Genuine	Total
Milk	325	40	365
Food	135	8	143
Drugs	13	—	13
Total	473	48	521

Samples found to be Not Genuine**MILK**

Containing 1-5 per cent added water	1
Containing 6-10 per cent added water	2
Containing 11-15 per cent added water	1
Containing 16-20 per cent added water	1
Containing 21-25 per cent added water	1
Deficient in fat ranging from 3.3 to 48 per cent...	11
Below for Solids-not-Fat (Mastitis Positive)	12
Contaminated with extraneous sediment...	5
Contaminated with foreign matter plus one wood louse	2
Abnormal freezing points	2
Mass of hairs adhering to inside of bottle cap	1
Containing a granite particle	1

OTHER COMMODITIES

Meat Pie—Contaminated with mould	1
Potted Meat Paste—Presence of preservative disclosed (sulphur dioxide is not permitted in Potted Meat Paste)	2
Ice Cream—32 per cent deficient in Fat	1
Chicken Breast in Jelly—Contained an insect	1
Bread and Butter—Spread consisted of Margarine and not Butter	2
Bread—Contaminated with bird droppings	1

Other Samples Analysed and found Genuine

Milk (325), Ice Cream (18), Sweets (12), Sausage (7), Whisky (7), Butter (4), Bread and Butter (4), Flour (4), Fishcakes (3), Stewed Steak in Gravy (3), Porridge Oats (3), Rum (3), Sugar (3), Almond Flavouring (3), Pure Cream (2), Double Cream (2), Lemon Cheese (2), Jelly (2), Semolina (2), Orange Drink (2), Rice Pudding (2), Liquid Paraffin B.P. (2), and one each of : Minced Beef Loaf, Potted Salmon with Butter, Shredded Beef Suet, Chicken Fritters, Brawn, Pressed Beef, Corned Pork Roll, Instant Chicken Stuffing, Braised Pork Kidneys, Salad Cream, Condensed Milk, Milk Loaf, Bread Rolls, Buttered Scones, Cumberland Rum Butter, Indian Brandee, Gin, Mincemeat, Christmas Pudding, Instant Bread Sauce, Chocolate Cake Covering, Eccles Cakes, Vegetable Oil Cooking, Mixed Cut Peel, Marzipan, Mixed Fruit, Custard Powder, Blackcurrant Jam, Pure Lard, Marmalade, Sago Pudding, Ground Rice, Groundnut Oil, Essence of Anchovies, White Pepper, Essence of Rennet, Strawberry Jam, Curry Powder, Tomato Sauce, Lemon Powder, Garlic Flavouring, Instant Mashed Potato, Milk Shake Syrup, Pudding Mixture, Cake Mixture, Puff Pastry, Ginger Punch, Castor Oil B.P., Cinnamon and Quinine, Codeine Tablets B.P., Bicarbonate of Soda B.P., Glycerin B.P., Rose Hip Syrup, Olive Oil, Borax B.P., Bronchial Mixture, Cough Linctus, Menthol and Eucalyptus Pastilles.

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